FORECLOSE A MORTGAGE

IN THE UNITED STATES DISTRICT COURT FOR THE WESTERN DISTRICT OF NEW YORK	
UNITED STATES OF AMERICA,	Civil No.:
Plaintiff	COMPLAINT - ACTION TO

-v-

Patricia M. Rodger

JOHN DOE, MARY ROE AND XYZ CORPORATION, 7206 Eelpot Road Naples, New York 14512

Defendants	

The United States of America, a Sovereign, by Forsyth, Howe, O'Dwyer, Kalb & Murphy, P.C., Attorneys for the Plaintiff, complains and alleges as follows:

- 1. This Court has jurisdiction under the provisions of Title 28, United States Code, Section 1345.
- 2. On or about 10/10/2002, at the request of the defendant, Patricia M. Rodger, (hereinafter referred to as the "Debtor"), the Plaintiff, the United States of America, acting by and through its agency, USDA Rural Housing Service f/k/a Farmers Home Administration

(hereinafter referred to as the "Plaintiff"), did lend to the Debtor, the sum of \$85,900.00, which sum the Debtor did undertake and promise to repay, with interest at 6.75% in specified monthly installments.

- 3. As evidence of the indebtedness, the Debtor, did execute and deliver to the Plaintiff a Promissory Note dated 10/10/2002, a true copy of which is attached as **Exhibit "A"**.
- 4. In order to secure the payment of the indebtedness the Debtor, did execute, acknowledge and deliver to the Plaintiff, a real property mortgage dated 10/10/2002, a true copy of which is attached as Exhibit "B".
- 5. The mortgage was duly recorded on 10/10/2002 in the Ontario County Clerk's Office in Liber 1384 of Mortgages at Page 918.
- 6. This loan was reamortized by Reamortization Agreement dated 2/10/2008 and executed by the Debtor on 2/10/2008. This loan was further reamortized by Reamortization Agreement dated 7/10/2012 and executed by the Debtor on 7/24/2012. A copy of the Reamortization Agreements are attached hereto as **Exhibit "C"**.
- 7. Plaintiff is now the owner and holder of the Promissory Note and Mortgage.

- 8. Pursuant to the terms of certain Subsidy Repayment Agreements and/or Interest Credit Agreements entered into between the Plaintiff and the Debtor, the Debtor received a subsidy reduction in the payments due and/or the interest described in the Promissory Note was reduced during each Agreement's effective period. Pursuant to 42 U.S.C. 1490a, and the fourth paragraph of the Mortgage, any subsidy received and/or any interest credit assistance is subject to recapture upon the disposition of the property. True copies of said Subsidy Repayment Agreements and/or Interest Credit Agreements are attached as Exhibits "D".
- 9. The Debtor has breached and violated the provisions of the Promissory Note and Mortgage in that Debtor did neglect and fail to pay the installments of principal and interest when due, despite due demand therefore and/or by failing to make payment of real property taxes when due, thus making it necessary for the Plaintiff to pay the same to protect its interest. Copies of the Acceleration Letters are attached hereto as **Exhibit "E"**.
- 10. By reason of the defaults described herein, Plaintiff has elected to declare the entire sums secured by the mortgage to be due and payable.

11. There is now justly due and payable to the Plaintiff, as of 4/19/2018, on the Promissory Note and Mortgage the following sums:

Unpaid Principal (Note)	\$85,608.85
Unpaid Interest (Note)	\$26,628.83
Unpaid Principal (Advances)	\$11,480.50
Unpaid Interest (Advances)	\$1,188.25
Escrow/Impound (Advances)	\$1,295.80
Late Fees	\$37.36

Total

\$126,239.59

together with interest at the rate of 6.75% per annum on principal and all advances from 4/20/2018.

- 12. Upon information and belief, Plaintiff may be compelled to make additional advances for payment of taxes, hazard insurance water and sewer charges, or other municipal assessments maintenance, in order that it may protect and preserve security, but the nature and amount thereof is unknown to Plaintiff at this time. Nevertheless, Plaintiff seeks recovery thereof and therefore, together with interest thereon.
- 13. No other action or proceeding has been brought at law or otherwise for the recovery of said sums secured by the Promissory Note and Mortgage, or any part thereof.
- 14. That the Plaintiff has complied with the notice provisions of New York State RPAPL Section 1304. A copy of the required notice is attached hereto as **Exhibit "F"**.

- 15. Upon information and belief, the provisions of Banking Law Section 595-a, and any rules and regulations promulgated thereunder, and Banking law Sections 6-1 and 6-m and RPAPL section 1302(1) are not applicable to the mortgage loan(s) that is the subject of this proceeding.
- 16. At the time this proceeding was commenced, the Plaintiff has complied with the provisions of New York State RPAPL Section 1306 regarding filing with the Superintendent of the New York State Banking Department. A copy of the required filing is attached hereto as **Exhibit** "G".
- 17. The true names of the defendants John Doe, Mary Roe and XYZ Corporation are unknown to the United States, those names being fictitious, but intending to designate tenants, occupants or other persons, if any, having or claiming any estate or interest in possession upon the premises or any portion thereof.

WHEREFORE, Plaintiff demands judgment:

(a) That the defendants, or either or any of them, subsequent to the filing of the Notice of Pendency of this action, and every person whose conveyance or encumbrance is subsequent or subsequently recorded, be forever barred and foreclosed of all right, claim, lien and equity of redemption in the mortgaged premises;

Case 6:18-cv-06350 Document 1 Filed 05/08/18 Page 6 of 59

(b) That the premises may be decreed to be sold according to law;

(c) That the amount due to the Plaintiff on the promissory note and

mortgage may be adjudged;

(d) That the moneys arising from the sale may be brought into Court;

(e) That the Plaintiff may be paid the amount adjudged to be due to

the Plaintiff with interest thereon to the time of such payment, together

with the costs and expenses of this action and the expenses of the sale,

so far as the amount of such money properly applicable thereto will pay

the same;

(f) And that the Plaintiff may have such other and further relief as

may be just and equitable.

DATED:

Rochester, New York May 7, 2018

S/Robert J. Kalb

FORSYTH, HOWE, O'DWYER,

KALB & MURPHY, P.C.

One South Clinton Avenue, Suite 1000

Rochester, NY 14604

(585) 325-7515

Fax: (585) 325-6287

Email: Kalb@forsythhowe.com

Case 6:18-cv-06350 Document 1 Filed 05/08/18 Page 8 of 59-----

USDA-RHS Form FmHA 1940-16 (Rev. 10-96)

REARORFIXED, NOT PAIN

#### PROMISSORY NOTE

Type of Loan SECTION 502		_
Date: October 10 , 2002		
	elpot Road	····
	operty Address)	
•		
Naples, Or	tario	, New York
(City or Town)	(County)	(State)
BORROWER'S PROMISE TO PAY. In return for a loan States of America, acting through the Rural Housing S (this amount is called "principal"), plus interest.  INTEREST. Interest will be charged on the unpaid pri pay interest at a yearly rate of 6.750 %. The interest and after any default described below.  PAYMENTS. I agree to pay principal and interest usin I. Principal and interest payments shall be temporary arriginal and interest payments.	ncipal until the full est rate required by g one of two altern	amount of the principal has been paid. I will this section is the rate I will pay both before atives indicated below:
shall be added to the principal. The new principal of	k below. I authorize d the amount of su rincipal and interest	e the Government to enter the amount of ch regular installments in the box below when in installments as indicated in the box below.
I will pay principal and interest by making a payment will make my monthly payment on the 10thday of for 395 months. I will make these payments even other charges described below that I may owe undefore principal. If on October 10,2035, I still that date, which is called the "maturity date."  My monthly payment will be \$ 541.98 address noted on my billing statement	y month until I have ler this note. My rowe amounts under . I will make my me or a	

PRINCIPAL ADVANCES. If the entire principal amount of the loan is not advanced at the time of loan closing, the unadvanced balance of the loan will be advanced at my request provided the Government agrees to the advance. The Government must make the advance provided the advance is requested for an authorized purpose. Interest shall accrue on the amount of each advance beginning on the date of the advance as shown in the Record of Advances below. I authorize the Government to enter the amount and date of such advance on the Record of Advances.

HOUSING ACT OF 1949. This promissory note is made pursuant to title V of the Housing Act of 1949. It is for the type of loan indicated in the "Type of Loan" block at the top of this note. This note shall be subject to the present regulations of the Government and to its future regulations not inconsistent with the express provisions of this note.



### Case 6:18-cv-06350 Document 1 Filed 05/08/18 Page 9 of 59

LATE CHARGES. If the Government as not received the full amount of any withly payment by the end of 15 days after the date it is due, I will pay a late charge. The amount of the charge will be 2.000 percent of my overdue payment of principal and interest. I will pay this charge promptly, but only once on each late payment.

BORROWER'S RIGHT TO PREPAY. I have the right to make payments of principal at any time before they are due. A apayment of principal only is known as a "prepayment." When I make a prepayment, I will tell the Government in writing that I am making a prepayment.

I may make a full prepayment or partial prepayment without paying any prepayment charge. The Government will use all of my prepayments to reduce the amount of principal that I owe under this Note. If I make a partial prepayment, there will be no changes in the due date or in the amount of my monthly payment unless the Government prepayment, there will be no changes in the due date or in the amount of my monthly payment unless the Government's agrees in writing to those changes. Prepayments will be applied to my loan in accordance with the Government's regulations and accounting procedures in effect on the date of receipt of the payment.

ASSIGNMENT OF NOTE. I understand and agree that the Government may at any time assign this note without my consent. If the Government assigns the note I will make my payments to the assignee of the note and in such case the term "Government" will mean the assignee.

CREDIT ELSEWHERE CERTIFICATION. I certify to the Government that I am unable to obtain sufficient credit from other sources at reasonable rates and terms for the purposes for which the Government is giving me this loan.

USE CERTIFICATION. I certify to the Government that the funds I am borrowing from the Government will only be used for purposes authorized by the Government.

LEASE OR SALE OF PROPERTY. If the property constructed, improved, purchased, or refinanced with this loan is (1) leased or rented with an option to purchase, (2) leased or rented without option to purchase for 3 years or longer, or (3) is sold or title is otherwise conveyed, voluntarily or involuntarily, the Government may at its option declare the entire remaining unpaid balance of the loan immediately due and payable. If this happens, I will have to immediately pay off the entire loan.

REQUIREMENT TO REFINANCE WITH PRIVATE CREDIT. I agree to periodically provide the Government with information the Government requests about my financial situation. If the Government determines that I can get a loan from a responsible cooperative or private credit source, such as a bank or a credit union, at reasonable rates and terms for similar purposes as this loan, at the Government's request, I will apply for and accept a loan in a sufficient amount to pay this note in full. This requirement does not apply to any cosigner who signed this note pursuant to section 502 of the Housing Act of 1949 to compensate for my lack of repayment ability.

SUBSIDY REPAYMENT AGREEMENT. I agree to the repayment (recapture) of subsidy granted in the form of payment assistance under the Government's regulations.

CREDIT SALE TO NONPROGRAM BORROWER. The provisions of the paragraphs entitled "Credit Elsewhere Certification" and "Requirement to Refinance with Private Credit" do not apply if this loan is classified as a nonprogram loan pursuant to section 502 of the Housing Act of 1949.

DEFAULT. If I do not pay the full amount of each monthly payment on the date it is due, I will be in default. If I am in default the Government may send me a written notice telling me that if I do not pay the overdue amount by a certain date, the Government may require me to immediately pay the full amount of the unpaid principal, all the interest that I owe, and any late charges. Interest will continue to accrue on past due principal and interest. Even if, at a time when I am in default, the Government does not require me to pay immediately as describe in the preceding sentence, the Government will still have the right to do so if I am in default at a later date. If the Government has required me to immediately pay in full as described above, the Government will have the right to be paid back by me for all of its costs and expenses in enforcing this promissory note to the extent not prohibited by applicable law. Those expenses include, for example, reasonable attorney's fees.



## Case 6:18-cv-06350 Document 1 Filed 05/08/18 Page 10 of 59

NOTICES. Unless applicable law returns a different method, any notice that the given to me under this note will be given by delivering it or by mailing it by first class mail to me at the property address listed above or at a different address if I give the Government a notice of my different address. Any notice that must be given to the Government will be given by mailing it by first class mail to the Government at USDA / Rural Housing Service, c/o Customer will be given by mailing it by first class mail to the Government at USDA / Rural Housing Service, c/o Customer will be given by mailing it by first class mail to the Government at USDA / Rural Housing Service, c/o Customer will be given by mailing it by first class mail to the Government at USDA / Rural Housing Service, c/o Customer will be given by mailing it by first class mail to the Government at USDA / Rural Housing Service, c/o Customer will be given by mailing it by first class mail to the Government at USDA / Rural Housing Service, c/o Customer will be given by mailing it by first class mail to the Government at USDA / Rural Housing Service, c/o Customer will be given by mailing it by first class mail to the Government at USDA / Rural Housing Service, c/o Customer will be given by mailing it by first class mail to the Government at USDA / Rural Housing Service, c/o Customer will be given by mailing it by first class mail to the Government at USDA / Rural Housing Service, c/o Customer will be given by mailing it by first class mail to the Government at USDA / Rural Housing Service will be given by mailing it by first class mail to the Government at USDA / Rural Housing Service will be given by mailing it by first class mail to the Government at USDA / Rural Housing Service will be given by mailing it by first class mail to the Government at USDA / Rural Housing Service will be given by mailing it by first class mail to the Government at USDA / Rural Housing Service will be given by mailing it by first class mail to the Government at USDA / Rural Hou

OBLIGATIONS OF PERSONS UNDER THIS NOTE. If more than one person signs this note, each person is fully and personally obligated to keep all of the promises made in this note, including the promise to pay the full amount owed. Any person who is a guarantor, surety, or endorser of this note is also obligated to do these things. The Government may enforce its rights under this note against each person individually or against all of us together. This means that may one of us may be required to pay all of the amounts owed under this note. The term "Borrower" shall refer to each person signing this note.

WAIVERS. I and any other person who has obligations under this note waive the rights of presentment and notice of dishonor. "Presentment" means the right to require the Government to demand payment of amounts due. "Notice of dishonor" means the right to require the Government to give notice to other persons that amounts due have not been paid.

WARNING: Failure to fully disclose accurate and truthful financial information in connection with my loan application may result in the termination of program assistance currently being received, and the denial of future federal assistance under the Department of Agriculture's Debarment regulations, 7 C.F.R. part 3017.

Palaisis M. Rocker Seal	Borrower Seal
PATRICIA M. RODGER  Seal  Borrower	Borrower

		RECORD OF A	DVANCES		DA OFF
	- DATE	AMOUNT	DATE	AMOUNT	DATE
AMOUNT	DAID			(15) \$	
		(8) \$		(16)\$	
		(9) \$		(17) \$	_
		(10) \$		(18) \$	
		(11) \$		(19)\$	•
		(12) \$		(20) \$	
		(13) \$		(21) \$	· ·
		(14) \$	TOTA		

A Resmortization Agreement dated February 10, 2008, in the principal sum of \$88,311.67, has been given to modify the payment schedule of this note.

Account #:

OCT 28 2002



ONTARIO COUNTY CLERK'S OFFICE CLERK'S RECORDING PAGE

#### Return To:

JOHN POLIMENI 540 S MAIN STREET CANANDAIGUA NY 14424

RODGER PATRICIA USA

Total:

M

Index MORTGAGE BOOK

Book 01384 Page 0918

This Document has been recorded

No. Pages 0008

Instrument MORTGAGE

Date: 10/10/2002

Time: 3:55:11

Control # 200210100224

M/T #

MT CT 003893

IN #

IN 2002 016129

Employee ID

COUNTER3

#### MORTGAGE TAX

RECORDING	\$	30.00	TAXABLE MORTGAGE AMT\$	85,900.00
SURCHARGE SURCHARGE	\$ \$	4.75 14.25	BASIC MORTGAGE TAX \$	.00
AFFIDAVIT	\$	5.00 .00	SPEC ADD'L MTG TAX \$	.00
	\$	.00	*************** <b>\$</b>	.00
-	\$ \$	.00	Total \$	.00

STATE OF NEW YORK ONTARIO COUNTY CLERK'S OFFICE

THIS SHEET CONSTITUTES THE CLERK'S ENDORSE-MENT REQUIRED BY SECTION 316-A (5) AND SECTION 319 OF THE REAL PROPERTY LAW OF THE STATE OF NEW YORK. \*\* DO NOT DETACH \*\*

> JOHN H. COOLEY COUNTY CLERK

54.00





100704 CRAS

Form Approved OMB No. 0575-0172

Form RD 3550-14 NY (Rev. 7-98)

United States Department of Agriculture Rural Housing Service

## MORTGAGE FOR NEW YORK

THIS MORTGAGE ("Security Instrument") is made on October 10, 2002 [Date] The mortgagor is PATRICIA M. RODGER, 15 W. Hollow Rd., #4, Naples

NY 14512
This Security Instrument is given to the United States of America acting through the Rural Housing Service or This Security Instrument is given to the United States of America acting through the Rural Housing Successor agency, United States Department of Agriculture ("Lender"), whose address is Rural Housing Successor agency, United States Department of Agriculture PO Ru 66890 Cs Toxic Service, c/o Centralized Servicing Center, United States Department of Agriculture, P.O. Box 66889, St. Louis, Missouri 63166,

Borrower is indebted to Lender under the following promissory notes and/or assumption agreements (herein collectively called "Note") which have been executed or assumed by Borrower and which provide for monthly payments, with the full debt, if not paid earlier, due and payable on the maturity date:

Date of Instrument

Principal Amount

Maturity Date

October 10, 2002

\$85,900.00

October 10, 2035

This Security Instrument secures to Lender: (a) the repayment of the debt evidenced by the Note, with interest, and all renewals, extensions and modifications of the Note; (b) the payment of all other sums, with interest, advanced under paragraph 7 to protect the property covered by this Security Instrument; (c) the performance of Borrower's covenants and agreements under this Security Instrument and the Note, and (d) the recapture of any payment assistance and subsidy which may be granted to the Borrower by the Lender pursuant to 42 U.S.C. \$\frac{1}{2}\$ 1472(g) or 1490a. For this purpose, Borrower irrevocably grants and conveys to Lender the following described property located in the County of Ontario , State of New York: Town of Naples

See attached Schedule A.

7206 Eelpot Road, Naples which has the address of

New York 14512

("Property Address");

According to the Paperwork Reduction Act of 1996, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this collection is 0575-0172. The time required to complete this information collection is estimated to average 15 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

Page 1 of 6

TOGETHER WITH all the improvements now or hereafter erected on the property, and all easements, appurtenances, and fintures which now or hereafter are a part of the property. All replacements and additions shall also be covered by this Security Instrument. All of the foregoing is referred to in this Security Instrument as the "Property."

BORROWER COVENANTS that Borrower is lawfully seised of the estate hereby conveyed and has the right to grant and convey the Property and that the Property is unencumbered, except for encumbrances of record. Borrower warrants and will defend generally the title to the Property against all claims and demands, subject to any encumbrances of record.

THIS SECURITY INSTRUMENT combines uniform covenants for national use and non-uniform covenants with limited variations by jurisdiction to constitute a uniform security instrument covering real property.

UNIFORM COVENANTS. Borrower and Lender covenant and agree as follows:

1. Payment of Principal and Interest; Prepayment and Late Charges. Borrower shall promptly pay when due the principal of and interest on the debt evidenced by the Note and any prepayment and late charges due under

2. Funds for Taxes and Insurance. Subject to applicable law or to a written waiver by Lender, Borrower the Note. shall pay to Lender on the day monthly payments are due under the Note, until the Note is paid in full, a sum ("Funds") for: (a) yearly taxes and assessments which may attain priority over this Security Instrument as a lien on the Property; (b) yearly leasehold payments or ground rents on the Property, if any; (c) yearly hazard or property insurance premiums; and (d) yearly flood insurance premiums, if any. These items are called "Escrow Items." Lender may, at any time, collect and hold Funds in an amount not to exceed the maximum amount a lender for a federally related mortgage loan may require for Borrower's escrow account under the federal Real Estate Settlement Procedures Act of 1974 as amended from time to time, 12 U.S.C. § 2601 et seq. ("RESPA"), unless another law or federal regulation that applies to the Funds sets a lesser amount. If so, Lender may, at any time, collect and hold Funds in an amount not to exceed the lesser amount. Lender may estimate the amount of Funds due on the basis of current data and reasonable estimates of expenditures of future Escrow Items or otherwise in accordance with applicable law.

The Funds shall be held by a federal agency (including Lender) or in an institution whose deposits are insured by a federal agency, instrumentality, or entity. Lender shall apply the Funds to pay the Escrow Items. Lender may not charge Borrower for holding and applying the Funds, annually analyzing the escrow account, or verifying the Escrow Items, unless Lender pays Borrower interest on the Funds and applicable law permits Lender to make such a charge. However, Lender may require Borrower to pay a one-time charge for an independent real estate tax reporting service used by Lender in connection with this loan, unless applicable law provides otherwise. Unless an agreement is made or applicable law requires interest to be paid, Lender shall not be required to pay Borrower any agreement is made or applicable law requires interest to be paid, Lender shall not be required to pay Borrower and Lender may agree in writing, however, that interest shall be paid interest or earnings on the Funds. Borrower and Lender may agree in writing, however, that interest shall be paid on the Funds. Lender shall give to Borrower, without charge, an annual accounting of the Funds showing credits and debits to the Funds and the purpose for which each debit to the Funds was made. The Funds are pledged as additional security for all sums secured by this Security Instrument.

If the Funds held by Lender exceed the amounts permitted to be held by applicable law, Lender shall account to Borrower for the excess funds in accordance with the requirements of applicable law. If the amount of the Funds held by Lender at any time is not sufficient to pay the Escrow Items when due, Lender may so notify Borrower in writing, and, in such case Borrower shall pay to Lender the amount necessary to make up the deficiency. Borrower

shall make up the deficiency in no more than twelve monthly payments, at Lender's sole discretion.

Upon payment in full of all sums secured by this Security Instrument, Lender shall promptly refund to Borrower any Funds held by Lender. If Lender shall acquire or sell the Property after acceleration under paragraph 22, Lender, prior to the acquisition or sale of the Property, shall apply any Funds held by Lender at the time of

acquisition or sale as a credit against the sums secured by this Security Instrument.

3. Application of Payments. Unless applicable law or Lender's regulations provide otherwise, all payments received by Lender under paragraphs 1 and 2 shall be applied in the following order of priority: (1) to advances for the preservation or protection of the Property or enforcement of this lien; (2) to accrued interest due under the Note; (3) to principal due under the Note; (4) to amounts required for the escrow items under paragraph 2; (5) to late charges and other fees and charges.

4. Charges; Liens. Borrower shall pay all taxes, assessments, charges, fines and impositions attributable to the Property which may attain priority over this Security Instrument, and leasehold payments or ground reats, if any. Borrower shall pay these obligations in the manner provided in paragraph 2, or if not paid in that manner, Borrower shall pay them on time directly to the person owed payment. Borrower shall promptly furnish to Lender all notices of amounts to be paid under this paragraph. If Borrower makes these payments directly, Borrower shall promptly furnish to Lender receipts evidencing the payments.



Borrower shall promptly discharge any lien which has priority over this Security Instrument unless Lender has agreed in writing to such lien or Borrower: (a) agrees in writing to the payment of the obligation secured by the lien in a manner acceptable to Lender; (b) contests in good faith the lien by, or defends against enforcement of the lien; or (c) secures in legal proceedings which in the Lender's opinion operate to prevent the enforcement of the lien; or (c) secures in the legal proceedings which in the Lender's opinion operate to prevent the enforcement of the lien; or (c) secures in the legal proceedings which in the Lender's opinion operate to prevent the enforcement of the lien; or (c) secures in the legal proceedings which in the Lender's opinion operate to prevent the enforcement of the lien. from the holder of the lien an agreement satisfactory to Lender subordinating the lien to this Security Instrument. If Lender determines that any part of the Property is subject to a lien which may attain priority over this Security Instrument, Lender may give Borrower a notice identifying the lien. Borrower shall satisfy the lien or take one or more of the actions set forth above within ten (10) days of the giving of notice.

Borrower shall pay to Lender such fees and other charges as may now or hereafter be required by regulations of Lender, and pay or reimburse Lender for all of Lender's fees, costs, and expenses in connection with any full or

partial release or subordination of this instrument or any other transaction affecting the Property.

5. Hazard or Property Imsurance. Borrower shall keep the improvements now existing or hereafter erected on the Property insured against loss by fire, hazards included within the term "extended coverage" and any other hazards, including floods or flooding, for which Lender requires insurance. This insurance shall be maintained in the amounts and for the periods that Lender requires. The insurer providing the insurance shall be chosen by Borrower subject to Lender's approval which shall not be unreasonably withheld. If Borrower fails to maintain coverage described above, at Lender's option Lender may obtain coverage to protect Lender's rights in the Property pursuant to paragraph 7.

All insurance policies and renewals shall be in a form acceptable to Lender and shall include a standard mortgagee clause. Lender shall have the right to hold the policies and renewals. If Lender requires, Borrower shall promptly give to Lender all receipts of paid premiums and renewal notices. In the event of loss, Borrower shall give prompt notice to the insurance carrier and Lender. Lender may make proof of loss if not made promptly by

Unless Lender and Borrower otherwise agree in writing, insurance proceeds shall be applied to restoration or repair of the Property damaged, if the restoration or repair is economically feasible and Lender's security is not lessened. If the restoration or repair is not economically feasible or Lender's security would be lessened, the insurance proceeds shall be applied to the sums secured by this Security Instrument, whether or not then due, with any excess paid to Borrower. If Borrower abandons the Property, or does not answer within thirty (30) days a notice from Lender that the insurance carrier has offered to settle a claim, then Lender may collect the insurance proceeds. Lender may use the proceeds to repair or restore the Property or to pay sums secured by this Security Instrument, whether or not then due. The thirty (30) day period will begin when the notice is given

Unless Lender and Borrower otherwise agree in writing, any application of proceeds to principal shall not extend or postpone the due date of the monthly payments referred to in paragraphs 1 and 2 or change the amount of the payments. If after acceleration the Property is acquired by Lender, Bosrower's right to any insurance policies and proceeds resulting from damage to the Property prior to the acquisition shall pass to Lender to the extent of the

sums secured by this Security Instrument immediately prior to the acquisition.

Preservation, Misintensuce, and Protection of the Property; Borrower's Loan Application; Leaseholds. Borrower shall not destroy, damage or impair the Property, allow the Property to deteriorate, or commit waste on the Property. Borrower shall maintain the improvements in good repair and make repairs required by Lender. Borrower shall comply with all laws, ordinances, and regulations affecting the Property. Borrower shall be in default if any forfeiture action or proceeding, whether civil or criminal, is begun that in Lender's good faith judgment could result in forfeiture of the Property or otherwise materially impair the lien created by this Security Instrument or Lender's security interest. Borrower may cure such a default by causing the action or proceeding to be dismissed with a ruling that, in Lender's good faith determination, precludes forfeiture of the Borrower's interest in the Property or other material impairment of the lien created by this Security Instrument or Lender's security interest. Borrower shall also be in default if Borrower, during the loan application process, gave materially false or inaccurate information or statements to Lender (or failed to provide Lender with any material information) in connection with the loan evidenced by the Note. If this Security Instrument is on a leasehold, Borrower shall comply with all the provisions of the lease. If Borrower acquires fee title to the Property, the leasehold and the fee title shall not merge unless Lender agrees to the merger in writing.

7. Protection of Lender's Rights in the Property. If Borrower fails to perform the covenants and agreements contained in this Security Instrument, or there is a legal proceeding that may significantly affect Lender's rights in the Property (such as a proceeding in bankruptcy, probate, for condemnation or forfeiture or to enforce laws or regulations), then Lender may do and pay for whatever is necessary to protect the value of the Property and Lender's rights in the Property. Lender's actions may include paying any sums secured by a lien which has priority over this Security Instrument, appearing in court, paying reasonable attorneys' fees and entering on the Property to make repairs. Although Lender may take action under this paragraph 7, Lender is not required to do so. Any amounts disbursed by Lender under this paragraph 7 shall become additional debt of Borrower secured by this Security Instrument. Unless Borrower and Lender agree to other terms of payment, these amounts shall bear interest from the date of disbursement at the Note rate and shall be payable, with interest, upon notice from Lender

to Borrower requesting payment.





8. Refinancing. If at any time it shall appear to Lender that Borrower may be able to obtain a loan from a responsible cooperative or private credit source, at reasonable rates and terms for loans for similar purposes, Borrower will, upon the Lender's request, apply for and accept such loan in sufficient amount to pay the note and

any indebtedness secured hereby in full. 9. Inspection. Lender or its agent may make reasonable entries upon and inspections of the Property. Lender shall give Borrower notice at the time of or prior to an inspection specifying reasonable cause for the inspection.

10. Condemnation. The proceeds of any award or claim for damages, direct or consequential, in connection with any condemnation or other taking of any part of the Property, or for conveyance in lieu of condemnation, are hereby assigned and shall be paid to Leader. In the event of a total taking of the Property, the proceeds shall be applied to the sums secured by this Security Instrument, whether or not then due, with any excess paid to Borrower. In the event of a partial taking of the Property in which the fair market value of the Property immediately before the taking is equal to or greater than the amount of the sums secured by this Security Instrument immediately before the taking, unless Borrower and Lender otherwise agree in writing, the sums secured by this Security Instrument shall be reduced by the amount of the proceeds multiplied by the following fraction: (a) the total amount of the sums secured immediately before the taking, divided by (b) the fair market value of the Property immediately before the taking. Any balance shall be paid to Borrower. In the event of a partial taking of the Property in which the fair market value of the Property immediately before the taking is less than the amount of the sums secured hereby immediately before the taking, unless Borrower and Lender otherwise agree in writing or unless applicable law otherwise provides, the proceeds shall be applied to the sums secured by this Security Instrument whether or not the

If the Property is abandoned by Borrower, or if, after notice by Lender to Borrower that the condemnor offers sums are then due. to make an award or settle a claim for damages, Borrower fails to respond to Lender within thirty (30) days after the date the notice is given, Lender is authorized to collect and apply the proceeds, at its option, either to restoration or repair of the Property or to the sums secured by this Security Instrument, whether or not then due. Unless Lender and Bosrower otherwise agree in writing, any application of proceeds to principal shall not extend or postpone the due date of the monthly payments referred to in paragraphs 1 and 2 or change the amount of such payments.

11. Borrower Not Released; Forbearance By Lender Not a Waiver. Extension of the time for payment or

modification of amortization of the sums secured by this Security Instrument granted by Lender to Borrower and any successor in interest of Borrower shall not operate to release the liability of the original Borrower or Borrower's successors in interest. Lender shall not be required to commence proceedings against any successor in interest or refuse to extend time for payment or otherwise modify amortization of the surns secured by this Security Instrument by reason of any demand made by the original Borrower or Borrower's successors in interest. Any forbearance by Lender in exercising any right or remedy shall not be a waiver of or preclude the exercise of any right or remedy.

12. Successors and Assigns Bound; Joint and Several Liability; Co-signers. The covenants and agreements of this Security Instrument shall bind and benefit the successors and assigns of Lender and Borrower, subject to the provisions of paragraph 16. Borrower's covenants and agreements shall be joint and several. Any Borrower who co-signs this Security Instrument but does not execute the Note: (a) is co-signing this Security Instrument only to mortgage, grant and convey that Borrower's interest in the Property under the terms of this Security Instrument; (b) is not personally obligated to pay the sums secured by this Security Instrument; and (c) agrees that Lender and any other Borrower may agree to extend, modify, forbear or make any accommodations with regard to the terms of this Security Instrument or the Note without that Borrower's consent.

13. Notices. Any notice to Borrower provided for in this Security Instrument shall be given by delivering it or by mailing it by first class mail unless applicable law requires use of another method. The notice shall be directed to the Property Address or any other address Borrower designates by notice to Lender. Any notice to Lender shall be given by first class mail to Lender's address stated herein or any other address Lender designates by notice to Borrower. Any notice provided for in this Security Instrument shall be deemed to have been given to Borrower or

Lender when given as provided in this paragraph. 14. Governing Law; Severability. This Security Instrument shall be governed by federal law. In the event that any provision or clause of this Security Instrument or the Note conflicts with applicable law, such conflict shall not affect other provisions of this Security Instrument or the Note which can be given effect without the conflicting provision. To this end the provisions of this Security Instrument and the Note are declared to be severable. This instrument shall be subject to the present regulations of Lender, and to its future regulations not inconsistent with the express provisions hereof. All powers and agencies granted in this instrument are coupled with an interest and are irrevocable by death or otherwise; and the rights and remedies provided in this instrument are cumulative to remedies provided by law.

Borrower's Copy. Borrower acknowledges receipt of one conformed copy of the Note and of this

16. Transfer of the Property or a Beneficial Interest in Borrower. If all or any part of the Property or any interest in it is leased for a term greater than three (3) years, leased with an option to purchase, sold, or transferred (or if a beneficial interest in Borrower is sold or transferred and Borrower is not a natural person) without Lender's prior written consent, Lender may, at its option, require immediate payment in full of all sums secured by this





17. Nondiscrimination. If Borrower intends to sell or rent the Property or any part of it and has obtained Security Instrument. Lender's consent to do so (a) neither Borrower nor anyone authorized to act for Borrower, will refuse to negotiate for the sale or rental of the Property or will otherwise make unavailable or deny the Property to anyone because of race, color, religion, sex, national origin, handicap, age, or familial status, and (b) Borrower recognizes as illegal and hereby disclaims and will not comply with or attempt to enforce any restrictive covenants on dwelling relating

to race, color, religion, sex, national origin, handicap, age or familial status.

18. Sale of Note; Change of Loan Servicer. The Note or a partial interest in the Note (together with this Security Instrument) may be sold one or more times without prior notice to Borrower. A sale may result in a change in the entity (known as the "Loan Servicer") that collects monthly payments due under the Note and this Security Instrument. There also may be one or more changes of the Loan Servicer unrelated to a sale of the Note. If there is a change of the Loan Servicer, Borrower will be given written notice of the change in accordance with paragraph 13 above and applicable law. The notice will state the name and address of the new Loan Servicer and the address to

19. Uniform Federal Non-Judicial Foreclosure. If a uniform federal non-judicial foreclosure law applicable which payments should be made. to foreclosure of this security instrument is enacted, Lender shall have the option to foreclose this instrument in

accordance with such federal procedure.

20. Hazardous Substances. Borrower shall not cause or permit the presence, use, disposal, storage, or release of any hazardous substances on or in the Property. The preceding sentence shall not apply to the presence, use, or storage on the Property of small quantities of hazardous substances that are generally recognized to be appropriate to normal residential uses and to maintenance of the Property. Borrower shall not do, nor allow anyone else to do, anything affecting the Property that is in violation of any federal, state, or local environmental law or regulation.

Borrower shall promptly give Lender written notice of any investigation, claim, demand, lawsuit or other action by any governmental or regulatory agency or private party involving the Property and any hazardous substance or environmental law or regulation of which Borrower has actual knowledge. If Borrower learns, or is notified by any governmental or regulatory authority, that any removal or other remediation of any hazardous substance affecting the Property is necessary, Borrower shall promptly take all necessary remedial actions in accordance with applicable environmental law and regulations.

As used in this paragraph "hazardous substances" are those substances defined as toxic or hazardous substances by environmental law and the following substances: gasoline, kerosene, other flammable or toxic petroleum products, toxic pesticides and herbicides, volstile solvents, materials containing asbestos or formaldehyde, and regulations and laws radioactive materials. As used in this paragraph, "environmental law" means federal laws and regulations and laws and regulations of the jurisdiction where the Property is located that relate to health, safety or environmental

21. Cross Collateralization. Default hereunder shall constitute default under any other real estate security protection. instrument held by Lender and executed or assumed by Borrower, and default under any other such security

instrument shall constitute default hereunder.

## NON-UNIFORM COVENANTS. Bersower and Lender further covenant and agree as follows:

22. SHOULD DEFAULT occur in the performance or discharge of any obligation in this instrument or secured by this instrument, or should the parties named as Borrower die or be decreed incompetent, or should any one of the parties named as Borrower be discharged in bankruptcy or declared an insolvent, or make an assignment for the benefit of creditors, Lender, at its option, with or without notice, may: (a) declare the entire amount unpaid under the note and any indebtedness to Lender hereby secured immediately due and payable, (b) for the account of Borrower incur and pay reasonable expenses for repair or maintenance of and take possession of, operate or rent the property, (c) upon application by it and production of this instrument, without other evidence and without notice of hearing of said application, have a receiver appointed for the property, with the usual powers of receivers in like cases, (d) foreclose this instrument as provided herein or by law, and (e) enforce any and all other rights and remedies provided herein or by present or future laws.

23. The proceeds of foreclosure sale shall be applied in the following order to the payment of: (a) costs and expenses incident to enforcing or complying with the provisions hereof, (b) any prior liens required by law or a competent court to be so paid, (c) the debt evidenced by the note and all indebtedness to Lender secured hereby, (d) inferior liens of record required by law or a competent court to be so paid, (e) at Lender's option, any other indebtedness of Borrower owing to Lender, and (f) any balance to Borrower. At foreclosure or other sale of all or any part of the property, Lender and its agents may bid and purchase as a stranger and may pay Lender's share of the purchase price by crediting such amount on any debts of Borrower owing to Lender, in the order prescribed

24. Borrower agrees that Lender will not be bound by any present or future state laws, (a) providing for above. valuation, appraisal, homestead or exemption of the Property, (b) prohibiting maintenance of an action for a deficiency judgment or limiting the amount thereof or the time within which such action may be brought, (c) prescribing any other statue of limitations, (d) allowing any right of possession or, (e) limiting the conditions which Lender may be regulation impose, including the interest rate it may charge, as a condition of approving a transfer of the property to a new Borrower. Borrower expressly waives the benefit of any such state law. Borrower hereby relinquishes, waives, and conveys all rights, inchoate or consummate, of descent.

25. Riders to this Security Instrument. If one or more riders are executed by Borrower and recorded together with this Security Instrument, the covenants and agreements of each rider shall be incorporated into and shall amend and supplement the covenants and agreements of this Security Instrument as if the rider(s) were a part of this

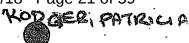
Security Instrument. [Check applicable box]

Condominium Rider   Planned Unit Develo	Spinetit Kide: [[[Omer(s) (aboors)]
Witnesses:	Jahren M. Holes (Seal) Borrower
	Borrower (Seal)
ACKN	OWLEDGMENT
STATE OF NEW YORK } SS:	
COUNTY OF ONTARIO	
public in and for said State, personally appeared to me or proved to me on the basis of satisfactor	in the year 2002, before me, the undersigned, a notary Patricia M. Rodger , personally known ry evidence to be the individual(s) whose names(s) is (are ledged to me that he/she/they executed the same in heir signature(s) on the instrument, the individual(s) or the ed, executed the instrument.
	and Permi
	Notary Public

JOHN A. POLINIENI
NOTARY PUBLIC, STATE OF NEW YORK
ONTARIO COUNTY NO. 4779955
COMMISSION EXPIRES OCT. 31, 200\_C

#### SCHEDULE A

All that tract or parcel of land, situate in the Town of Naples, County of Ontario and State of New York, bounded and described as follows: Commencing at a point in the center line of Eelpot Road which is also the southwest corner of premises now or formerly of Domm (Liber 879, pg. 992) thence; North 62°03'39" West and along the center line of Eelpot Road a distance of 110.00 feet to a point which is the Southeast corner of premises now or formerly Payne (Liber 788, pg. 130), thence; North 08°35'22" East and along the East line of premises now or formerly of Payne a distance of 326.00 feet to an iron pin, thence; North 88°27'15" East a distance of 105.43 feet to an iron pin set in the West line of premises now or formerly of Lester (Liber 1059, pg. 158) thence; South 08°35'22" West and along the West line of said premises now or formerly of Lester and long the West line of premises now or formerly of Domm a distance of 381.00 feet to the point and place of beginning containing 0.842 acres of land.



#### REAMORTIZATION AGREEMENT

Account Number

Effective Date February 10, 2008

The United States of America, acting through the Rural Housing Service,
United States Department of Agriculture (Lender), is the owner and
holder of a promissory note or assumption agreement (Note) in the
principal sum of \$ 85900.00, plus interest on the unpaid principal of
6.75000% per year, executed by PATRICIA M RODGEN; and
(Borrower) dated October 10, 2002
and payable to the order of the Lender. The current outstanding balance
includes unpaid principal, accrued unpaid interes, unpaid advances and
fees. The total outstanding balance is \$ 88311.67.

In consideration of the reamortization of the note or assumption agreement and the promises contained in this agreement, the outstanding balance is capitalized and is now principal to be repaid at 6.75000% per annum at \$ 588.10 per month beginning March 10, 2008 and on the 10th day of each succeeding month until the principal and interest are paid, except that the final installment of the entire debt, if not paid sooner, will be due and payable on October 10, 2035.

If the outstanding loan balance prior to reamortization was reduced by a payment which was later determined to be uncollectible, Rural Housing Service will charge the account with an amount equal to the uncollectible payments. This amount is due and payable on the effective date it is charged to the account and may accrue interest at the promissory note rate.

Subject to applicable law or to a written waiver by Lender, Borrower shall pay to lender on the day monthly payments are due under the Note, until the Note is paid in full, a sum ("Funds") for : (a) yearly taxes and assessments which may attain priority over Lender's mortgage or deed of trust (Security Instrument) as a lien on the secured property described in the Security Agreement (Property); (b) yearly leasehold payments or ground rents on the Property, if any; (c) yearly hazard or property insurance premiums; and (d) yearly flood insurance premiums, if any. These items are called "Escrow Items." Lender may, at any time, collect and hold funds in an amount not to exceed the maximum amount a lender for a federally related mortgage loan, may require for Borrower's escrow account under the federal Real Estate Settlement Procedures Act of 1974 as amended from time to time, 12 U.S.C. Section 2601 et seq. ("RESPA"), unless another law or federal regulation that applies to the funds sets a lesser amount. If so, Lender may, at any time, collect and hold funds in an amount not to exceed the lesser amount. Lender may estimate the amount of Funds due on the basis of current data and reasonable estimates of expenditures of future Escrow Items or otherwise in accordance with applicable law.



The funds shall be held by a federal agency, including Lender, or in an institution whose deposits are insured by a federal agency, instrumentality, or entity. Lender shall apply funds to pay the Escrow Items. Lender may not charge Borrower for holding and applying the Funds, annually analyzing the escrow account, or verifying the Escrow Items, unless Lender pays Borrower interest on the Funds and applicable law permits the Lender to make such charge. However, Lender may require borrower to pay a one-time charge for an independent real estate tax reporting service used by Lender in connection with this loan, unless applicable law provides otherwise. Unless an agreement is made or applicable law requires interest to be paid, Lender shall not be required to pay Borrower any interest or earnings on the funds. Borrower and Lender may agree in writing, however, that interest shall be paid on the funds.

Lender shall give to borrower, without charge, an annual accounting of the funds, showing credits and debits to the funds and the purpose for which each debit to the Funds was made. The funds are pledged as additional security for all sums secured by this Security Instrument.

If the Funds held by Lender exceed the amounts permitted to be held by applicable law, Lender shall account to Borrower for the excess Funds in accordance with the requirements of applicable law. If the amount of the Funds held by Lender at any time is not sufficient to pay the Escrow Items when due, Lender may notify Borrower in writing, and, in such case Borrower shall pay to Lender the amount necessary to make up the deficiency. Borrower shall make up the deficiency in no more than twelve monthly payments, at Lender's sole discretion.

Upon payment in full of all sums secured by this Security Instrument, Lender shall promptly refund to Borrower any Funds held by Lender. If Lender shall acquire or sell the Property, Lender, prior to the acquisition or sale of the Property, shall apply any Funds held by Lender at the time of acquisition or sale as a credit against the sums secured by this Security Instrument.

Unless changed by this agreement, all of the terms of the note or assumption agreement or the instruments that secure them, remain unchanged.

Upon default in the payment of any one of the above installments or failure to comply with any of the conditions and agreements contained in the above-described note or assumption agreement or the instruments securing it, the Lender, at its option may declare the entire debt immediately due and payable and may take any other action authorized to remedy the default.

Jafisein M. Borrower	Rodge	_Date	[W, 2008
Borrower		_ Date	-

563

#### REAMORTIZATION AGREEMENT

Account Number

Effective Date
July 10, 2012

87498.65.

The United States of America, acting through the Rural Housing Service,
United States Department of Agriculture (Lender), is the owner and
holder of a promissory note or assumption agreement (Note) in the
principal sum of \$ 85900.00, plus interest on the unpaid principal of
6.75000% per year, executed by PATRICIA M RODGER and
, (Borrower) dated October 10, 2002
and payable to the order of the Lender. The current outstanding balance
includes unpaid principal, accrued unpaid interest, unpaid advances and

In consideration of the reamortization of the note or assumption agreement and the promises contained in this agreement, the outstanding balance is capitalized and is now principal to be repaid at 6.75000% per annum at \$ 622.30 per month beginning August 10, 2012 and on the 10th day of each succeeding month until the principal and interest are paid, except that the final installment of the entire debt, if not paid sooner, will be due and payable on October 10, 2035.

fees. The total outstanding balance is \$

If the outstanding loan balance prior to reamortization was reduced by a payment which was later determined to be uncollectible, Rural Development will charge the account with an amount equal to the uncollectible payments. This amount is due and payable on the effective date it is charged to the account and may accrue interest at the promissory note rate.

Subject to applicable law or to a written waiver by Lender, Borrower shall pay to lender on the day monthly payments are due under the Note, until the Note is paid in full, a sum ("Funds") for : (a) yearly taxes and assessments which may attain priority over Lender's mortgage or deed of trust (Security Instrument) as a lien on the secured property described in the Security Agreement (Property); (b) yearly leasehold payments or ground rents on the Property, if any; (c) yearly hazard or property insurance premiums; and (d) yearly flood insurance premiums, if any. These items are called "Escrow Items." Lender may, at any time, collect and hold funds in an amount not to exceed the maximum amount a lender for a federally related mortgage loan, may require for Borrower's escrow account under the federal Real Estate Settlement Procedures Act of 1974 as amended from time to time, 12 U.S.C. Section 2601 et seq. ("RESPA"), unless another law or federal regulation that applies to the funds sets a lesser amount. If so, Lender may, at any time, collect and hold funds in an amount not to exceed the lesser amount. Lender may estimate the amount of Funds due on the basis of current data and reasonable estimates of expenditures of future Escrow Items or otherwise in accordance with applicable law.

The funds shall be held by a federal agency, including Lender, or in an institution whose deposits are insured by a federal agency, instrumentality, or entity. Lender shall apply funds to pay the Escrow Items. Lender may not charge Borrower for holding and applying the Funds, annually analyzing the escrow account, or verifying the Escrow Items, unless Lender pays Borrower interest on the Funds and applicable law permits the Lender to make such charge. However, Lender may require borrower to pay a one-time charge for an independent real estate tax reporting service used by Lender in connection with this loan, unless applicable law provides otherwise. Unless an agreement is made or applicable law requires interest to be paid, Lender shall not be required to pay Borrower any interest or earnings on the funds. Borrower and Lender may agree in writing, however, that interest shall be paid on the funds.

Lender shall give to borrower, without charge, an annual accounting of the funds, showing credits and debits to the funds and the purpose for which each debit to the Funds was made. The funds are pledged as additional security for all sums secured by this Security Instrument.

If the Funds held by Lender exceed the amounts permitted to be held by applicable law, Lender shall account to Borrower for the excess Funds in accordance with the requirements of applicable law. If the amount of the Funds held by Lender at any time is not sufficient to pay the Escrow Items when due, Lender may notify Borrower in writing, and, in such case Borrower shall pay to Lender the amount necessary to make up the deficiency. Borrower shall make up the deficiency in no more than twelve monthly payments, at Lender's sole discretion.

Upon payment in full of all sums secured by this Security Instrument, Lender shall promptly refund to Borrower any Funds held by Lender. If Lender shall acquire or sell the Property, Lender, prior to the acquisition or sale of the Property, shall apply any Funds held by Lender at the time of acquisition or sale as a credit against the sums secured by this Security Instrument.

Unless changed by this agreement, all of the terms of the note or assumption agreement or the instruments that secure them, remain unchanged.

Upon default in the payment of any one of the above installments or failure to comply with any of the conditions and agreements contained in the above-described note or assumption agreement or the instruments securing it, the Lender, at its option may declare the entire debt immediately due and payable and may take any other action authorized to remedy the default.

Don Rocker	Date	7/24/12
Borrower	Date	

oma PID 966 levised 03/9		•	URAL HOUSE SUBSIDY REN		RVICE CENTIFICATION	=1 <del>11000</del>	024502+ L1011041
12	PATRICIA M RO	DOGER			OCT 2 A 200k	u	08/11/04
0	7206 EELPOT R	OAD '			OCT 14 2004	1	
•	NAPLES	NY 14512			Turnesselma I Inil	1	
	NAPLES	-M1 14012		Fron	Find Proceeding Unit		
YOU	IR PAYMENT SUBSIC	Y REQUEST C	ANNOT BE PRO	CESSE			
belo	information I have pro w is being collected to Digte and accurate info	determine if I ar	n eligible to rece	ive pay	my knowledge. I under nent subsidies and that enalties.	stand that the failure to p	he information rovide
<u>y</u>	K. & P.	deer	9/28/04	•			
Born	ower Signature	0	Date		wer Signature	CODE .	Date
. Höhi	e Phoné No; ( <u>485).</u>		2 Alte	rnate Pi	none ör Work No: (58)	5 546	- <u>392</u> 2
1 10111	AUI MI	ST RETURN TH			BY MAIL DO NOT F		
							9880i
1. Si	GN AND RETURN TH	E ATTACHED °	AUTHORIZATIO	ON TO P	ELEASE INFORMATIC	M- LOUM	3030° t.
A D	LÉASE FILL OUT THE	: EOI I OWNIG (	HART COMPLE	FTELY:			
				AGE	SOCIAL SECURITY	FULL TW	E DISABLED
	DUSEHOLD MEMBER ILL NAME; BEGIN	TO THE		LIGHT	NUMBER	STUDEN	IT YES/NO
	TH YOURSELF	1				YESIN	
7	HEIRIG M. Ros	A SELF				NO	NO
}—							
						<del> </del>	
		<del> </del>					
ــا	to at the Bid		vous household	file Fed	eral income Tax last ye	ar?	•
	VALUE INCT	NCI INE A CO	py of last ye	ans in	S FORM(8) 1040, 1040	el, tugur	, PLANILLA DE
	CONTRIBUC	YON OF THE	FILE TAX RECO	ADS FC	R ALL ADULTS WHO	FILE.	
	•	訯	YMOI SEMD M.	2 FOI III	PO257		
	Yes X No_is a	nyone living in y	our household s	en-empi F TSA 1	EAR'S FEDERAL INC	OME TAX	
		FOR CORF.	DEW COLL OF	-		- 100	
	\$ 1, 83/.00 Am		eto: Tavos due es	ch vear	fam ex	empt from	paying. 🔲
5.						t have Insu	-
6.	\$ 399.00 Amo				•		anne. 🔲
	ATTACH THE TWO	2) MOST RECE	NT PAY STUBS	FOR A	L JOBS IN YOUR HOL	ISEHOLD	
DE 7.	AND ASSESS ETE TH	E FOLLOWING	FOR EACH JUI	<del>3</del> :	EMPLOYER ADDRES		PLOYER
		AMOUNT OF	EMPLOYER	į	EMPLOTER ADDRES	;	HONE
H	IOUSEHOLD		· MAME			1 61	t ex tenemo
H	IOUSEHOLD MEMBER'S	YEARLY	NAME				UMBER
M M F	IOUSEHOLD AEMBER'S FULL NAME	YEARLY INCOME	Rehabslitet	on s	311 AKKANDEK SI	aut .	. 1
M M F	IOUSEHOLD AEMBER'S FULL NAME	YEARLY INCOME	t 4	400	311 Abxander St Cebester, wew you	aut .	35-546-392
M M F	IOUSEHOLD MEMBER'S	YEARLY INCOME	t 4	2014	311 Alexander G Ichostor, wew you 144	aut .	. 1
M M F	IOUSEHOLD AEMBER'S FULL NAME	YEARLY INCOME	Reliabilitati Counceline Cassessine	2014	311 Alexander Si lebester, wew fre 144	aut .	. 1
M M F	IOUSEHOLD AEMBER'S FULL NAME	YEARLY INCOME	Reliabilitati Counceline Cassessine	2014	311 Alexander Sa Gelester, wew yer 14de	aut .	. 1
M M F	IOUSEHOLD AEMBER'S FULL NAME	YEARLY INCOME	Reliabilitati Counceline Cassessine	2014	311 Alexander Ga Gelesfor, wew fre 14de	aut .	. 1



		CHOAL WILL	Sinu Jer	IAIMA			20 1101100X
<b>3550-21</b> : 03/98	DAVMEN	RURAL HOUS	ENEWAL	CERTIFICAT	ION	_	e in a line
03/80	PATMER	7, 000000	DEC	EIVED	7	0	6/21/05
PATRICIA M	RODGER		תבע	CIVED	I		
1		1	11.0	25 2005	1		
7206 EELPOT	ROAD	1	JUL	CO 7003	1		
NAPLES	NY 145	512		N			
		<b>X</b>		rocessing Unit	1		
Please provide the following	. t.e	ion in int IF ANY	REQUESTE	DINFORMATIC	N IS NOT	PROVIDED	• :
Please provide the following PAYMENT SUI	lowing information	ERT CANNOT BE	ROCESSE	Dŧ			•
					understa	nd that the i	nformation
YOUR PAYMENT SUI The information i have below is being collected	provided is co	mpiele and But w	eceive Dayn	nent subsidies a	nd that fal	ure to provi	de *
below is being collecte complete and accurate	ed to determine	an result in crimina	and civil p	enatties.			
complete and accurate	a tillommeron o						
White M. Ko	Var	6/30/05		Slaggisto			Date
Borrower Signature	8	Date		wer Signature	AREA CO	DE	. 40 41
AREA	CODE	201	Altemate Pf	ióne er Werk Nö	(385)	546	5740
Home Phone No: 67	5)5/4-6	RN THIS FORM (N	OT A COPY	BY MAIL DO	NOT FAX	(l	
		um i mis runum ii:		, -	DESATION	FORM 350	50-1.
YOU 1. SIGN AND RETUR	N THE ATTAC	HED 'AUTHORIZ	ation to f	ELEASE INFO	Hillerinois	, 0, ,,,,	
I. SIGH AND ILL		ALLAST COL	IDI ETELY:				
2. PLEASE FILL OUT	THE FOLLOW	VING CHART CON BELATIONSHIP	AGE	SOCIAL SECU		<b>——</b>	DISABLET
HOUSEHOLD MEM		THE HEAD		NUMBER	1	STUDENT YES/NO	1EOMO
FULL NAME: BEGI	N .	O 1110 1100 1-0				TESTIES	
WITH YOURSELF	SELF			l		NO	NO
137 A D	dia Set	<u> </u>	+				
TOTELLE IT . I'V				1			
POPRISE M.N.			-	A STATE OF THE PARTY OF THE PAR			
MARKIN M. M.							
Market M. M.							
POPRICE MINE	Did program	living in your house	chold file Fe	deral Income Ta	x last year	7 7 1040ā P	AMILLA
3. Yes No YOU M	_ Did anyone	living in your house A COPY OF LAS	shold file Fe	deral income Ta	x last year 40, 1040E s who fi	/? Z, 1040Ā, P	LANILLA I
3. Yes X No YOU M	_ Did anyone UST INCLUDE NEUCION, OR	A COPY OF LAS	ecantie S	OR ALL ADULT	x last year 40, 1040E S WHO FI	7 Z, 1040Ä, P LE	LANILLA
CONTE	ust include Mbucion, or	A COPY OF LAS TELEFILE TAX FI DO NOT SEN	ECORDS F	OR ALL ADULT	s WHO F	LE.	LANILLA
CONTE	ust include Mbucion, or	A COPY OF LAS TELEFILE TAX FI DO NOT SEN	ECORDS F	OR ALL ADULT	s WHO F	LE.	LAMILLA
4. Yes X No_	UST INCLUDE RIBUCION, OR Is anyone liv 	E A COPY OF LAS TELEFILE TAX FI DO NOT SEN Ing in your househ INCLUDE A COP	ECORDS F D 1W-2 FOR old self-emp Y OF LAST	OR ALL ADULT VISI!! Noved? YEAR'S FEDER	s who fi	ME TAX	
4. Yes X No_	UST INCLUDE RIBUCION, OR Is anyone liv 	E A COPY OF LAS TELEFILE TAX FI DO NOT SEN Ing in your househ INCLUDE A COP	ECORDS F D 1W-2 FOR old self-emp Y OF LAST	OR ALL ADULT VISI!! Noved? YEAR'S FEDER	S WHO FI	ME TAX	ying. 🔲 -
4. Yes X No_ IF YES SCHE	UST INCLUDE HBUCION, OR Is anyone liv 	E A COPY OF LAS I TELEFILE TAX R DO NOT SEN ING IN YOUR HOUSEN INCLUDE A COP OR F. Isal Estate Jaxes d	ECORDS F D W-2 FOR old self-emp y OF LAST ue, each yea	OR ALL ADULT VISI!! Noved? YEAR'S FEDER	S WHO FI	ME TAX	ying. 🔲 -
4. Yes No_ IF YES SCHE 5. \$ 4.48.61	UST INCLUDE RIBUCION, OR  IS anyone liv  YOU MUST DULE FOR C	E A COPY OF LAS TELEFILE TAX R DO NOT SEN ing in your househ INCLUDE A COP' OR F. leal Estate Taxes of	ECORDS FOR WAZFORD WAZFORD OLD SELF-COMPANY OF LAST US CACH YES	OR ALL ADULT MS!!! kloyed? YEAR'S FEDER  ar. '	S WHO FI  ALINCO  Lam.exe  I do not	ME TAX mpt.from.pa have insura	ying. 🔲 -
4. Yes X No_ IF YES SCHE 5. \$ 4,458.04 6. \$ 401.00	UST INCLUDE RIBUCION, OR  Is anyone liv  YOU MUST DULE FOR CO  Amount of RI  Amount of Pi	E A COPY OF LAS TELEFILE TAX R DO NOT SEN ing in your househ INCLUDE A COP' OR F. leal Estate Taxes of roperty insurance (	ECORDS FOR WAS FOR WAS FOR WAS FOR LAST US EACH YES	OR ALL ADULT VISIT NOVED? YEAR'S FEDER OR.  OR.  OR.  OR.  OR.  OR.  OR.  OR	S WHO FI	ME TAX mpt.from.ps have insuran SEHOLD	ying. 🔲 -
4. Yes No_ #F YES  5. \$ 4.01.01  6. \$ 401.01  AND COMPLET	UST INCLUDE RIBUCION, OR  IS anyone liv  YOU MUST DULE FOR C  Amount of R  Amount of P  TWO (2) MOST THE FOLLO	A COPY OF LAS TELEFILE TAX R DO NOT SEN ing in your househ INCLUDE A COP' OR F. leal Estate Taxes of roperty insurance ( RECENT PAY ST OWING FOR EACH	ECORDS FOR WAS FORD WAS FORD WAS FORD WE WAS FORD WAS FOR	OR ALL ADULT MS!!! kloyed? YEAR'S FEDER  ar. '	S WHO FI	ME TAX mpt from pa have insuran SEHOLD S ! EMP	ying. [] - nce. [] LOYER
4. Yes No_ IF YES  5. \$ 401.00  6. \$ 401.00  AND COMPLETED HOUSEHOLD	IST INCLUDE HEUCION, OR IS anyone liv YOU MUST DULE FOR C Amount of R Amount of P TWO (2) MOST TE THE FOLL AMOUNT	A COPY OF LAST TELEFILE TAX R DO NOT SEN ing in your househ INCLUDE A COP' OR F. leal Estate Taxes of roperty insurance ( RECENT PAY ST OWING FOR EACH T OF EMPLO	ECORDS FO D W-2 FOR old self-emp y OF LAST use each year acid each year use FOR A UBS FOR A 1 JOB;	OR ALL ADULT VISIT NOVED? YEAR'S FEDER OR.  OR.  OR.  OR.  OR.  OR.  OR.  OR	S WHO FI	ME TAX  mpt from pa have insuran SEHOLD  S	ying. [] ~ nce. [] LOYER ONE
4. Yes No No SCHE 5. \$ 40.00 6. \$ 40.00 ATTACHTHE HOUSEHOLD MEMBER'S	UST INCLUDE RIBUCION, OR  IS anyone liv  YOU MUST DULE FOR C  Amount of R  Amount of P  TWO (2) MOST THE FOLLO	A COPY OF LAST TELEFILE TAX R DO NOT SEN ING IN YOUR HOUSEIT INCLUDE A COPY OR F. Had Estate Taxes of TRECENT PAYST OWING FOR EACH TOF EMPLOY Y NAM	ECORDS FO D W-2 FOR old self-emp y OF LAST use each year acid each year use FOR A UBS FOR A 1 JOB;	OR ALL ADULT VISIT NOVED? YEAR'S FEDER OR.  OR.  OR.  OR.  OR.  OR.  OR.  OR	S WHO FI	ME TAX  mpt from pa have insuran SEHOLD  S	ying. [] - nce. [] LOYER
4. Yes No_ IF YES  5. \$ 401.00  6. \$ 401.00  AND COMPLET  HOUSEHOLD	IST INCLUDE HEUCION, OR IS ENYONE IV YOU MUST DULE FOR CO Amount of R Amount of Pi TWO (2) MOST TE THE FOLLO AMOUNT YEARL	A COPY OF LAST TELEFILE TAX R DO NOT SEN ING IN YOUR HOUSEIT INCLUDE A COPY OR F. Had Estate Taxes of TRECENT PAYST OWING FOR EACH TOF EMPLOY Y NAM	ECORDS FO D W-2 FOR old self-emp y OF LAST use each year acid each year use FOR A UBS FOR A 1 JOB;	OR ALL ADULT VISIT NOVED? YEAR'S FEDER OR.  OR.  OR.  OR.  OR.  OR.  OR.  OR	S WHO FI	ME TAX  mpt from pa have insuran SEHOLD  S	ying. [] ~ nce. [] LOYER ONE
4. Yes No_ IF YES  5. \$ ALBO 6. \$ 401.00  AND COMPLE  HOUSEHOLD MEMBER'S FULL NAME	IST INCLUDE HEUCION, OR IS ENYONE IV YOU MUST DULE FOR CO Amount of R Amount of Pi TWO (2) MOST TE THE FOLLO AMOUNT YEARL	A COPY OF LAST TELEFILE TAX R DO NOT SEN ING IN YOUR HOUSEIT INCLUDE A COPY OR F. Had Estate Taxes of TRECENT PAYST OWING FOR EACH TOF EMPLOY Y NAM	ECORDS FO D W-2 FOR old self-emp y OF LAST use each year acid each year use FOR A UBS FOR A 1 JOB;	OR ALL ADULT VISIT NOVED? YEAR'S FEDER OR.  OR.  OR.  OR.  OR.  OR.  OR.  OR	S WHO FI	ME TAX  mpt from pa have insuran SEHOLD  S	ying. [] ~ nce. [] LOYER ONE
4. Yes No No SCHE 5. \$ 40.00 6. \$ 40.00 AND COMPLETIONS HOUSEHOLD MEMBER'S	IST INCLUDE HEUCION, OR IS ENYONE IV YOU MUST DULE FOR CO Amount of R Amount of Pi TWO (2) MOST TE THE FOLLO AMOUNT YEARL	A COPY OF LAST TELEFILE TAX R DO NOT SEN ING IN YOUR HOUSEIT INCLUDE A COPY OR F. Had Estate Taxes of TRECENT PAYST OWING FOR EACH TOF EMPLOY Y NAM	ECORDS FO D W-2 FOR old self-emp y OF LAST use each year acid each year use FOR A UBS FOR A 1 JOB;	OR ALL ADULT VISIT NOVED? YEAR'S FEDER OR.  OR.  OR.  OR.  OR.  OR.  OR.  OR	S WHO FI	ME TAX  mpt from pa have insuran SEHOLD  S	ying. [] ~ nce. [] LOYER ONE
4. Yes No_ IF YES  5. \$ ALBO 6. \$ 401.00  AND COMPLE  HOUSEHOLD MEMBER'S FULL NAME	IST INCLUDE HEUCION, OR IS ENYONE IV YOU MUST DULE FOR CO Amount of R Amount of Po TWO (2) MOST TE THE FOLLO AMOUNT YEARL	A COPY OF LAST TELEFILE TAX R DO NOT SEN ING IN YOUR HOUSEIT INCLUDE A COPY OR F. Had Estate Taxes of TRECENT PAYST OWING FOR EACH TOF EMPLOY Y NAM	ECORDS FO D W-2 FOR old self-emp y OF LAST use each year acid each year use FOR A UBS FOR A 1 JOB;	OR ALL ADULT VISIT NOVED? YEAR'S FEDER OR.  OR.  OR.  OR.  OR.  OR.  OR.  OR	S WHO FI	ME TAX  mpt from pa have insuran SEHOLD  S	ying. [] ~ nce. [] LOYER ONE
4. Yes No_ IF YES  5. \$ A ABO.  6. \$ 401.01  AND COMPLET  HOUSEHOLD  MEMBER'S  FULL NAME	IST INCLUDE HEUCION, OR IS ENYONE IV YOU MUST DULE FOR CO Amount of R Amount of Po TWO (2) MOST TE THE FOLLO AMOUNT YEARL	A COPY OF LAST TELEFILE TAX R DO NOT SEN ING IN YOUR HOUSEIT INCLUDE A COPY OR F. Had Estate Taxes of TRECENT PAYST OWING FOR EACH TOF EMPLOY Y NAM	ECORDS FO D W-2 FOR old self-emp y OF LAST use each year acid each year use FOR A UBS FOR A 1 JOB;	OR ALL ADULT VISIT NOVED? YEAR'S FEDER OR.  OR.  OR.  OR.  OR.  OR.  OR.  OR	S WHO FI	ME TAX  mpt from pa have insuran SEHOLD  S	ying. [] ~ nce. [] LOYER ONE
4. Yes No_ IF YES  5. \$ A ABO.  6. \$ 401.01  AND COMPLET  HOUSEHOLD  MEMBER'S  FULL NAME	IST INCLUDE HEUCION, OR IS ENYONE IV YOU MUST DULE FOR CO Amount of R Amount of Po TWO (2) MOST TE THE FOLLO AMOUNT YEARL	A COPY OF LAST TELEFILE TAX R DO NOT SEN ING IN YOUR HOUSEIT INCLUDE A COPY OR F. Had Estate Taxes of TRECENT PAYST OWING FOR EACH TOF EMPLOY Y NAM	ECORDS FO D W-2 FOR old self-emp y OF LAST use each year acid each year use FOR A UBS FOR A 1 JOB;	OR ALL ADULT VISIT NOVED? YEAR'S FEDER OR.  OR.  OR.  OR.  OR.  OR.  OR.  OR	S WHO FI	ME TAX  mpt from pa have insuran SEHOLD  S	ying. [] ~ nce. [] LOYER ONE

Form RD 3550-21 Revised 03/98

# RURAL HOUSING SERVICE PAYMENT SUBSIDY RENEWAL CERTIFICATION

\*M2000001003: L1011007

PATMEN!

RECEIVED

03/08/06

PATRICIA M RODGER

7206 EELPOT ROAD NAPLES NY

NV 14512

1

FEB **2 7** 2007

## LOSS MITIGATION SECTION

Please provide the following information in ink. IF ANY REQUESTED INFORMATION IS NOT PROVIDED, YOUR PAYMENT SUBSIDY REQUEST CANNOT BE PROCESSED!

The information I have provided is complete and true to the best of my lorowledge. I understand that the information below is being collected to determine if I am eligible to receive payment subsidies and that failure to provide complete and accurate information can result in criminal and civil penalties.

below is being dollected to the complete and accurate information	nation can result in crimina	and civil p	enalties.		
Patricia M. Roy	per 2/15/07		wer Signature		Date
Borrower Signature AREA CODE			AREA (	XODE ) SAME	
Home Phone No: (585) \$	T RETURN THIS FORM (N	IOT A COP	) BY MAIL DO NOT F	AXI	
1. SIGN AND RETURN THE	AMERICA SALITHORIZ	ATION TO	RELEASE INFORMATIO	M' FORM 35	50-1.
P 1. SIGN AND RETURN THE	ATTACHED ADTITION				
2. PLEASE FILL OUT THE	FOLLOWING CHART COL	APLETELY:	SOCIAL SECURITY	FULL TIME	DISABLE
HOUSEHOLD MEMBER'S FULL NAME; BEGIN	RELATIONSHIP TO THE HEAD	AGE	NUMBER	STUDENT YESMO	YES/NO
WITH VOLIASELE				NA	NO
HARRICA M. Roches	SELF			<del> </del>	+
		and the same of the same			
				-	+
			To look w		
3. Yes No_Did:	enyone living in your house NCLUDE A COPY OF LAS	shold file Fe	derei income i ak iosi y de Formist 1040, 1044	)EZ, 1040A, P	lanilla e
YOU MUST IN	ICLUDE A COPY OF LAS ION, OR TELEFILE TAX R DO NOT SEN	ECORDS F	OR ALL ADULTS WHO	FILE	
CONTRIBUCI	DO NOT SEN	DW-2 FOR	MSIII		
A Yes No X Is an	yone living in your househ	old self-em	oloyed? ************************************	OMETAX	
F YES- YO	U MUST INCLUDE A COP	Y OF LAST	YEAR'S PEDEMAL ING		
	EAG A AGE			xempt from pa	rying. 🗌
5. 8/978-54 Amo	runt of Fieel Estate Texes of	iue each ye	20.	•	
det as Ame	insurance insurance	paid each ye	1917. I 400 FI	ot have Insura	irac. Li
6. \$ 431.00 AM		ILIRS FOR	ALL JOBS IN YOUR HO	USEHOLD	
7. ATTACH THE TWO	E FOLLOWING FOR EACH	H JOB:	1000	oc ! EMP	LOYER
	MOUNT OF EMPLO	YER	EMPLOYER ADDRE		IONE
MEMBER'S	YEARLY ! NAM	E ;			MBER
FULL NAME	INCOME Detail	6.1.10.40	W, COUNSELING	58.	5-
	KENAL			KL	11-396

\*\*\* COMPLETE THE BACK OF THIS FORM \*\*\*

ASSESSMENT SERVICES

311 Alexander 8t.

Durector

Rochester, NY 14404 Susan Szakland Form RO 3550-21 (03-06)

#### RURAL HOUSING SERVICE PAYMENT SUBSIDY RENEWAL ST

FORM APPROVED OMB NO. 0575-0172

08/11/05

PATRICIA M RODGER 7206 EELPOT ROAD NAPLES NY 14512

Front-End Processing Unit

OCT 24 2006

Please provide the following information in ink. IF ANY REQUESTED INFORMATION IS NOT PROVIDED. YOUR PAYMENT SUBSIDY REQUEST CANNOT BE PROCESSED!

The information I (we) have provided is complete and true to the best of my (out) knowledge. I (we) understand that the information below is being collected to determine if I am (we are) eligible to receive payment subsidies and that failure to provide complete and accurate information can result in criminal and civil penalties. alas las m DI

Patricia M. Rodge Borrower Signature	9/30/06 Date	Borrower Signature		Date
Home Phone No: (585) 374 -		rnate Phone or Work No: A COPY) BY MAIL DO NOT F	:AXI	<u>, , , , , , , , , , , , , , , , , , , </u>

1. ALL ADULT HOUSEHOLD MEMBERS MUST SIGN AN "AUTHORIZATION TO RELEASE INFORMATION" FORM 3550-1

,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			v.					
2. PLEASE FILL OUT THE FOL HOUSEHOLD MEMBER'S FULL NAME - BEGIN WITH	LOWING SECTION CO RELATIONSHIP TO THE HEAD	AGE		empl Yes	OYED /NO	FULL TIME STUDENT YES/NO		BLED /NO
YOURSELF Pateria In Rodale	SELF Daughters	,		X				X
	ground daughteke				X			X
	ground Church-Fex				1X		<b>1</b> /2	

Did anyone living in your household file Federal Income Tax last year? YOU MUST INCLUDE A COPY OF LAST YEAR'S IRS FORM(S) 1040, 1040EZ, 1040A, OR TELEFILE TAX RECORDS FOR ALL ADULT HOUSEHOLD MEMBERS WHO FILED. DO NOT SEND FORM 8453!!!

\_is anyone living in your household self-employed? IF YES - YOU MUST INCLUDE A COPY OF LAST YEAR'S FEDERAL INCOME TAX SCHEDULE FOR C OR F.

5. \$ 1,923.60 Amount of Real Estate Taxes due each year.

I am exempt from paying.

\_\_\_ Amount of Property Insurance paid each year. 6. \$ 421.00

I do not have insurance.

7. ATTACH THE TWO (2) MOST RECENT AND CONSECUTIVE PAY STUBS FOR ALL JOBS IN YOUR HOUSEHOLD AND COMPLETE THE FOLLOWING FOR EACH JOB:

COMPLETE THE FOLLOWING	AMOUNT OF	EMPLOYER NAME AND ADDRESS	EMPLOYER PHONE NO.
HOUSEHOLD MEMBER'S FULL NAME	YEARLY INCOME	Colon b. L. botings, Courselines of a	sesment Services
_		SEIF EMPLOYED COURTERING	585 374-6992
Pateicia M. Rocher.	\$8,067.00	NYS Dept. HEALT N	10131 519-611X
Jill Harris	6,953.00	ALUBS AT TO	(585) 374-8640
JH HAKE-18		L DELINE DESERV.	(586) 374-8608

\*\*\* COMPLETE 2ND PAGE OF THIS FORM \*\*\*

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a velid OMB control number. The valid OMB recording to the Paperwork reduction for the case, to produce an impart to a control number for this information editection is 0575-072. The time required to complete this information collection is 0575-072. The time required to complete this information collection is 0575-072. The time required to complete this information collection is 0575-072. The time required to complete this information collection, searching existing data sources, gettering and maintaining the data needed, and completing and reviewing the collection of information. Form RD 3550-21 (03-06)

#### **RURAL HOUSING SERVICE** PAYMENT SUBSIDY RENEWAL CERTIFICATION

FORM APPROVED OMB NO. 0575-0172

RECEIVED

08/10/07

PATRICIA M RODGER 7206 EELPOT ROAD NY 14512 NAPLES

OCT 1 1 2007

LOSS MITIGATION

Please provide the following info YOUR PAYMENT SUBSIDY RE	QUEST CANNOT BE PR	OCESSI	EDI						
The information I (we) have provintermation below is being collect provide complete and accurate in	and to delearnine it I am iv	re alei e	kidible to leceine bolom	ige. I fi ent sub	we) und sidies a	lerstand and that	i that th failure	e fo	
Petrici M. Rocky	Lept 30 2007	7						-	
Borrower Signature	Date	Borro	wer Signature			Date	<b>)</b>		
Home Phone No: (385)374	-699A AM	emate P	hone or Work No: (						
YOU MUST RE	TURN THIS FORM (NOT	A COP	Y) BY MAIL DO NOT	FAXI_	•			. ,	
1. ALL ADULT HOUSEHOLD MI						NOITA	FORM	3550-1	l
2. PLEASE FILL OUT THE FOL									
HOUSEHOLD MEMBER'S	RELATIONSHIP	AGE	SOCIAL SECURITY				TIME		
FULL NAME - BEGIN WITH	TO THE HEAD	<b>V V</b>	NUMBER		OYED		DENT /NO	DISAI YES	
YOURSELF				YES		150	X	VES	X
Hatticia M. Radges	SELF								
							<u> </u>		
12/11/2/11/2/11/2/11/2/11/2/11/2/11/2/	-								
							<u> </u>		
					<u> </u>	L	<u></u>		
MONE OF FOUR TRANS LINE &	ne living in your household COPY OF LAST YEAR	s ias fo	)RM(S) 1040, 1040EZ,	TOTOR	OR TE	LEFIL	ETAX	recor	IDS
FOR ALL ADULT HOU!	SEHOLD MEMBERS WH	O FILED	. DO NOT SEND FOR	M 845	9111				•
4. Yes No X is anyone	living in your household s ST INCLUDE A COPY OF	self-empl FLAST 1	loyed? YEAR'S FEDERAL INC	ONE T	ax sc	HEDUL	E FOR	CORI	ř.
5. \$ 21076-13 Amount					pt from				
438.00 Amount	t of Property Insurance pe	aid each	year. Id		rve insu				
7ATTACH THE TWO (2) MOS COMPLETE THE FOLLOW	ST RECENT AND CONS	ECUTIVI	EPĄYSTUBS FOR AL	I job	S IN YO				
HOUSEHOLD MEMBER'S	AMOUNT OF	T 6	MPLOYER NAME AN	D ADD	RESS				NE NO.
FULL NAME	YEARLY INCOM	E	ehabilitation ( NO assessmen			1.6	T. USAA	Sh	rka
		- R	epohilototian) (	BURES	diar	7	actor to		, , , , ,
Poteicia m. Rode	F27 202	A	WO OSSESSME	14	Service	£15	15 5	46-	<u>392.</u>
MHEKIA. In. Ro Cyc	0,000	-12	II Alexandres	* . Su	163	2			
	į.	10	y menuncer			r .	•		

\*\*\* COMPLETE 2ND PAGE OF THIS FORM \*\*\*

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is estimated to energie 30 minutes per response, including the time for reviewing instructions, searching existing date sources, gathering and maintaining the date needed, and completing and reviewing the collection of information.

)

AD 3550-21		RURAL HO							APPR 10.057	OVED 15-0172
PATRICIA M RODGER 7206 EELPOT ROAD NAPLES NY 14512		ENT SUBSIDY	· · · · · · · · · · · · · ·	SEP 0 1 2009		\	08/1	1/09		·
Please provide the following i	HECIUE D	1 Children con.			U					
The information I (see) have performation below is being colorovide complete and accurate	rovided is	complete and tru	e to the	best of my (our) knowled eligible to receive payme	ge. I (w ent subs	e) unde idies at	erstand nd that	thet the failure i	e io	
Interior M Kocker		Date	Bon	rower Signature	-		Date			
ALL ADULT HOUSEHOLD	RETURN MEMBE	THIS FORM (NO	T A COI IN "AUT	Phone or Work No: (2) PY) BY MAIL. DO NOT I THORIZATION TO RELE	FAXI		TION"		3550-1	
PLEASE FILL OUT THE F HOUSEHOLD MEMBER'S	OLLOWI	ATIONSHIP	AGE			WC5	FULL		DISA	21 ED
FULL NAME - BEGIN WITH		THE HEAD		NUMBER	EMPL(		YES		YES	NO_
YOURSELF			-		Z			X		X
YOURSELF Patricie Rodges	SEL	F			7			X		
Patricia Rockelk	SEL	F			\			X		X
YOURSELF PATRALIA RODALK	SEL	F			Z			X		
Patricia Robek			H 40° E	iorienti incomo Tex lest v	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \					
3. Yes X No Did at YOU MUST INCLUDE FOR ALL ADULT HE THE SE	nyone living A COPOUSEHO One fiving MUST IN	ng in your houselvery OF LAST YEAF ILD MEMBERS WI in your household CLUDE A COPY Comment of the copy o	HO FILE I self-em OF LAST tue each	year. lan	ear? 1040A, 7M 8453 COME To in exemption of the	OR TE	HEDUL Daying. Hance.	E FOR	C OR I	IDS
3. Yes X No Did at YOU MUST INCLUDE FOR ALL ADULT HE A. Yes No X is any IF YES - YOU S. \$ 4. //8.07 Am  8. \$ 457.00 Am  7. ATTACH THE TWO (2) COMPLETE THE FOLL HOUSEHOLD MEMBER	nyone living A COPOUSEHO ONE living MUST IN Ount of Pount	ng in your houselvery OF LAST YEAF LD MEMBERS WI IN YOUR household CLUDE A COPY Co eal Estate Taxes of roperty Insurance ECENT AND CON OR EACH JOB: AMOUNT OF YEARLY INCOME	HO FILE I sell-em DF LASI tue each paid each SECUTI F ME	ED. DO NOT SEND FOR ployed? I YEAR'S FEDERAL INC. I year. I do I'VE PAY STUBS FOR ALL INC. EMPLOYER NAME AN	ear? 1040A, RM 8453 COME To n exemple to not ha	OR TE	HEDUL Daying. Hance.	E FOR	C OR I	IDS
3. Yes X No Did at YOU MUST INCLUDE FOR ALL ADULT HE SES - YOU S. \$ 4, 1/8.07 Am  8. \$ 457.00 Am  7. ATTACH THE TWO (2) COMPLETE THE FOLL	nyone living A COPOUSEHO ONE fiving MUST IN OURL of Property of Pr	ng in your houselvery OF LAST YEAF LD MEMBERS WI IN YOUR household CLUDE A COPY Co eal Estate Taxes of roperty Insurance ECENT AND CON OR EACH JOB: AMOUNT OF YEARLY INCOME	HO FILE I sell-em DF LASI tue each paid each SECUTI F ME	ED. DO NOT SEND FOI ployed? I YEAR'S FEDERAL INC year. land the year. ld IVE PAY STUBS FOR AL	ear? 1040A, RM 8453 COME To n exemple to not ha	OR TE	HEDUL Daying. Hance.	E FOR	CORI	DS

According to the Paperwork Reduction Act of 1995, no parsons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0575-0172. The time required to complete this information collection is estimated to average 30 minutes per response, including the control number for this information collection of information. It is information, exactly a sisting data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

rm RID 3560-21 I-05 )	DAVN	RURAL HO	DUSING !	SERVICE AL CERTIFICATIO	N				APPRO 10.0575	
PATRICIA M RODGER 7206 EELPOT ROAD NAPLES NY 14512	. [	RECEIV SEP 15 7	ED			·	• 08/1	1/10		-
Please provide the following YOUR PAYMENT SUBSIDY	REGUE	)	· · · · ·					tent flor		
The information I (we) have provide complete and accura	provided ( plected to te inform	e complete and tre determine if I am ation can result in	re to the be (we are) el criminal an	st of my (our) knowled igible to receive payme d civil penalties.	ge. I (m	ej ana klies a	nd that t	zilure t	o	
Borrower Signature		Date	Borro	wer Signature	•		Date			
1. ALL ADULT HOUSEHOL	T RETUR D MEMBI	N THIS FORM (NO ERS MUST SIGN	an "Auth	ORIZATION TO RELE	AXI ASE IN	FORMA	TION"	FORM	3550-1	
2. PLEASE FILL OUT THE HOUSEHOLD MEMBER' FULL NAME - BEGIN WI	s RE	LATIONSHIP THE HEAD	AGE	SOCIAL SECURITY NUMBER	EMPL YES	NO	STUD YES/	ENT NO	DISABI YES/	
YOURSELF	SE LAS	F	<b></b>		' <del>-x</del> -			<u>X_</u>		
		·								
								-		
			<del> </del>			L	<u> </u>		<del> </del>	
YOU MUST INCLU FOR ALL ADULT I  4. Yes No X is any IF YES - YOU  5. \$ 3,194.62 And 6. \$ 475.00 Ard  -7: ATTACH THE TWO (2) COMPLETE THE FOLL	DE A CO HOUSEHO Yome faving I MUST IN HOURT OF F HOURT OF F LOVANG	PY OF LAST YEADLD MEMBERS V im your househol ICLUDE A COPY eal Estate Taxes roperty insurance ECENT AND COR	WHO FILED d self-empl OF LAST \ due each y paid each ISECUTIVI	ear. lan	OME To exemple not be	AX SCI ot from ( tive insu S IN YO	HEDULE Daying Tance. DUR HOI	FOR	C OR F.	<b>.</b>
YOU RUST INCLU FOR ALL ADULT I  4. Yes No X is any IF YES - YOU  5. \$ 3,194.62 And 6. \$ 475.00 Ar	DE A CO HOUSEHO Yome faving I MUST IN HOURT OF F HOURT OF F LOVANG	IN YOUR HOUSEHOLD MEMBERS VI IN YOUR HOUSEHOLD IN YOUR HOUSEHOLD ACOPY HOUSE A COPY HOUSE A COPY HOUSE AND CONTROL OF EACH JOB:	HO FILED d self-empl d self-empl due each y paid each ISECUTIV	DO NOT SEND FOR DEVELOPMENT INC.  PAY STUBS FOR ALL INC.  PAY STUBS FOR ALL INC.  IMPLOYER NAME AN	OME To exemple not be a JOB	AX SCI of from I we insu S IN YO RESS	MEDULE Daying . TERIOR . BUR HOL	FOR	C OR F.	E NO.
YOU MUST INCLU FOR ALL ADULT I  4. Yes No X is any IF YES - YOU  5. \$ 3,194.62 And 6. \$ 475.00 Ar  7. ATTACH THE TWO (2) COMPLETE THE FOLL HOUSEHOLD MEMBE	DE A COHOUSENCE  Your living I MUST IN  ROURT OF F  ROURT OF F  LOVING  RYS	in your househol in year and control in Each Job:  AMOUNT O YEARLY INCO	HO FILED d self-empl d self-empl due each y paid each ISECUTIV	DO NOT SEND FOR OVER THE PAY STUBS FOR ALL IMPLOYER NAME AN	OME To exemple not be a JOB	AX SCI of from I we insu S IN YO RESS	MEDULE Daying . TERIOR . BUR HOL	FOR	C OR F.	E NO.

According to the Peparwork Reduction Act of 1995, no parameter required to respond to a collection of information unless if displays a valid CMB control number. The valid CMB control number for this information collection is 0575-0172. The time required to complete this information collection is estimated to average 30 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

\*27000016402\* £1011001

Form RD 3550-21 (03-05)

#### **RURAL HOUSING SERVICE** PAYMENT SUBSIDY RENEWAL CERTIFICATION

FORM APPROVED OMB NO. 0575-0172

12/19/11

PATRICIA M RODGER 7206 EELPOT ROAD NY 14512 NAPLES

JAN 25 2012

CM BAB **AAU SECTION** 

Please provide the following information in ink. IF ANY REQUESTED INFORMATION IS NOT PROVIDED, YOUR PAYMENT SUBSIDY REQUEST CANNOT BE PROCESSED!

The information I (we) have provided is complete and true to the best of my (our) knowledge. I (we) understand that the information below is being collected to determine if I am (we are) eligible to receive payment subsidies and that failure to

provide complete and accurate information can result in crit	minal and civil penalties.	
Patrici M. Recker 1/2/2012  Borrower Signature  Date	Borrower Signature	Date
Home Phone No: (575) 374 6992 Alter YOU MUST RETURN THIS FORM (NOT	rmate Phone or Work No: (585) 3	
TOO MOST TIETOTHE THE	<u>-</u>	•

1. ALL ADULT HOUSEHOLD MEMBERS MUST SIGN AN "AUTHORIZATION TO RELEASE INFORMATION" FORM 3550-1

PLEASE FILL OUT THE FOLL HOUSEHOLD MEMBER'S FULL NAME - BEGIN WITH	OWING SECTION CO RELATIONSHIP TO THE HEAD	AGE	200 Ner and a contract of	EMPLO YES/	DYED	FULL STUI YES		DISAE	
Yourself Vatericia m. Rodyce.	SELF	•		X			<u> </u>		
									ļ
				<del>                                     </del>					
						-			-
			<u></u>		L		<u></u>	L	<u> </u>

Did anyone living in your household file Federal Income Tax last year? YOU MUST INCLUDE A COPY OF LAST YEAR'S IRS FORM(S) 1040, 1040EZ, 1940A, OR TELEFILE TAX RECORDS FOR ALL ADULT HOUSEHOLD MEMBERS WHO FILED. DO NOT SEND FORM 8453

		Market State of the State of th
4.	Yes	No $X$ is anyone living in your household self-employed? FYES – YOU MUST INCLUDE A COPY OF LAST YEAR'S FEDERAL INCOME TAX SCHEDULE FOR C OR F.

5. \$ 3.030.77 Amount of Real Estate Taxes due each year.

am exempt from paying.

6. \$ 510.60 Amount of Property Insurance paid each year.

t do not have insurance.

7. ATTACH THE TWO (2) MOST RECENT AND CONSECUTIVE PAY STUBS FOR ALL JOBS IN YOUR HOUSEHOLD AND COMPLETE THE FOLLOWING FOR EACH JOB:

COMPLETE THE FOLLOWING FOR HOUSEHOLD MEMBER'S FULL NAME	AMOUNT OF YEARLY INCOME	EMILEO I EL INCHES MAN DE LA CONTRACTION DEL LA CONTRACTION DE LA	EMPLOYER PHONE NO.
Patricia M. Rodger	*/8 700	REMABILITATION COUNSELINT AND PESCES MENT SERVICES	( )
Patrilia M. Roaque	16, 100	1160 PARTORD VICTOR RD SOITS B PHENTON NY 14534	( <i>585</i> ) <i>586-</i> 3336
			( )

\*\*\* COMPLETE 2ND PAGE OF THIS FORM \*\*\*

According to the Paperwork Flackscilon Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB According to the Paperwork resources has the payes are required to respond to a construct or anomalian unates a capage a value control number for this information collection is 0575-0172. The time required to complete this information collection is 0575-0172. The time required to complete this information collection is 0575-0172. The time required to complete this information collection is 0575-0172. The time required to complete collection is estimated to average 30 minutes per response, including the collection of information, time for reviewing instructions, asserbing existing data sources, gethering and maintaining the data needed, and completing and reviewing the collection of information.



n RD 3550-21 . )6 i	. 54	RURAL HO	DUSING RENEW	SERVICE ALCERTIFICATION	)N				APPA NO.05	
PATRICIA M ROD 7206 EELPOT RO NAPLES 7010	IGER AD NY 14512 O 2 90	3001 234	49 HEQUESTI	RECEIVAND 8 L	ZUTY Saling U	lift OVIDE		10/12		
The information i fi	me) have provided in the second accounts info		ie to the be (we are) et criminal an	est of my (our) knowled ligible to receive paym	ige. I (w ent subs	re) unde idies a	erstand ad that i	that the	e 10	
iome Phone No: E Y	586 194) 374: YOU MUST RET WISEHOLD MEI	URN THIS FORM (NO WBERS MUST SIGN A	T A COPY	none or Work No: (	raai			- FORM	3550-1	l
PLEASE FILL O HOUSEHOLD & FULL NAME - B YOURSEL	MEMBER'S LEGIN WITH	DWING SECTION CO RELATIONSHIP TO THE HEAD	AGE	Y: SOCIAL SECURITY NUMBER	EMPL(	NO	FULL STUC YES	ENT	DISA YES	
Bericia M Ka	dee	SELF			X				<u> </u>	ļĄ.
			<b>-</b>	•					<u> </u>	1
				·					二	上
				·						
3. Yes X No You Mus FOR ALL 4. Yes X No IF YE 5. \$ 2,284. 6. \$ 445.4 7. ATTACH THE COMPLETE THOUSEHOLD	Did anyone ST (NCLUDE A C ADULT HOUSE SER - YOU MUST 37 Amount of TWO (2) MOST THE FOLLOWIN D MEMBER'S	living in your household COPY OF LAST YEAR PHOLD MEMBERS Wing in your household I INCLUDE A COPY OF Real Estate Taxes of Property Insurance IT RECENT AND CONTIG FOR EACH JOB:	HO FILED I self-empl OF LAST \ lue each y paid each SECUTIVI	ear. (ar	eer? 1040A, 2M 8453 COME To n exemple to not he	AX SCI at from p we insu	HEDULI paying. mance. NUR HO	e for	CORI	F.
3. Yes X No You Mus FOR ALL 4. Yes X No IF YE 5. \$ 2, 287. 6. \$ 445.4 7. ATTACH THE COMPLETE THOUSEHOLD	Did anyone T INCLUDE A ADULT HOUSE Is anyone in E8 - YOU MUST 37 Amount CO Amount E TWO (2) MOST	living in your household to properly of LAST YEAR CHOLD MEMBERS Wing in your household rectude A COPY of Real Estate Taxes do Properly Insurance of RECENT AND CONTIGEROR EACH JOB:	HO FILED I self-empl OF LAST Y lue each y paid each SECUTIVI F ME	DO NOT SEND FOR ANY STUBS FOR AN EMPLOYER NAME AN	ear? 1040A, 2M 8453  COME To a exemple on the half JOB:	AX SCI of from p we insu s IN YC RESS	HEDULI paying. mance. NUR HO	e for	C OR!	F.
3. Yes X No You Mus FOR ALL 4. Yes X No IF YE 5. \$ 2, 284 6. \$ 445.6 7. ATTACH THE COMPLETE THOUSEHOLD FULL	Did anyone of INCLUDE A ADULT HOUSE of Is anyone in ES — YOU MUST OF AMOUNT OF TWO (2) MOST THE FOLLOWIN OF MEMBER'S NAME	tiving in your househad COPY OF LAST YEAR SHOLD MEMBERS WING in your household rectude A COPY of Real Estate Taxes of Property Insurance of Property Insurance of For EACH JOB:  AMOUNT OF YEARLY INCO	HO FILED I self-empl OF LAST Y lue each y paid each SECUTIVI F	DO NOT SEND FOR AUTOMOTION SEND FOR AUTOMOTION SEND FOR AUTOMOTION SEND FOR AUTOMOTION SEND SEND SEND SEND SEND SEND SEND SEN	ear? 1040A, 2M 6453  COME To exemple on the half JOB:	AX SCI of from p we insu s IN YC RESS	paying. mance. MUR HO	E FOR	CORI	F. NO NE N
3. Yes X No You Mus FOR ALL 4. Yes X No IF YE 5. \$ 2, 287. 6. \$ 445.4 7. ATTACH THE COMPLETE THOUSEHOLD	Did anyone of INCLUDE A ADULT HOUSE of Is anyone in ES — YOU MUST OF AMOUNT OF TWO (2) MOST THE FOLLOWIN OF MEMBER'S NAME	tiving in your househad COPY OF LAST YEAR SHOLD MEMBERS WING in your household rectude A COPY of Real Estate Taxes of Property Insurance of Property Insurance of For EACH JOB:  AMOUNT OF YEARLY INCO	HO FILED I self-empl OF LAST Y lue each y paid each SECUTIVI F ME	DO NOT SEND FOR ANY STUBS FOR AN EMPLOYER NAME AN	ear? 1040A 2M 8455 COME T In exemple to not he LL JOS!	AX SCI of from we insured insu	paying. mance. MUR HO	E FOR	C OR!	F. NO NE N
3. Yes X No You Mus FOR ALL 4. Yes X No IF YE 5. \$ 2, 284 6. \$ 445.6 7. ATTACH THE COMPLETE THOUSEHOLE FULL	Did anyone of INCLUDE A ADULT HOUSE of Is anyone in ES — YOU MUST OF AMOUNT OF TWO (2) MOST THE FOLLOWIN OF MEMBER'S NAME	tiving in your househad COPY OF LAST YEAR SHOLD MEMBERS WING in your household rectude A COPY of Real Estate Taxes of Property Insurance of Property Insurance of For EACH JOB:  AMOUNT OF YEARLY INCO	HO FILED I self-empl OF LAST Y lue each y paid each SECUTIVI F ME	DO NOT SEND FOR AUTOMOTION AND AUTOMOTION AUTOMOTIO	ear? 1040A 2M 8455 COME T In exemple to not he LL JOS!	AX SCI of from we insured insu	paying. mance. MUR HO	E FOR	CORI	F. ND NE N

According to the Paperwork Reduction Act of 1995, no parsons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is estimated to average 30 admittes per response, including the time for reviewing instructions, searching existing data sources, gethering and maintaining the data needed, and completing and reviewing the collection of information.

RD 3550-21		RURAL HO	JSING S	ERVICE	u _	$\wedge$	1	omb n	APPRO 0.0575	5-0172
5)	PAYM	ENT SUBSIDY F	<b>SENEW</b>	L CERTIFICATION		41	10/1	# 14 A		•
•				RECEIV	<b>EDX</b>	赵	10/1	0/12		
PATRICIA M RODGER				DOT DO N	. 4	T	†	- ~	_	
7206 EELPOT ROAD	E43			OCT 29 20		1				
NAPLES NY 141	Jik			1_		1				
				Front-End Process		VIDE	<b>)</b> ,			
Please provide the follow	itsmoini priv	on in ink, IF ANY RE ET CANNOT BE RE	QUESTE OCESSE	DIA CHARLES	P. oth	1	•			
~~i\ \	11 4 1	11'/ <del>o</del> <1/1/	HH R	1	je. i (w	e) unde	rstand	that the	<u>.</u>	
The information (we) had information below is being	we browning		ناه ادمه مد	milde to receive payme	तां इध्येष्ट	dies at	g grac	Minte i	**	
information below is bein provide complete and acc	g <del>consolou a</del> curate infolm	ation can result in c	riminal and	d civil penalties.						
provide complete and act		10 10 2/								
Antrois M. K.	when _	10/23/12		ver Signature	_		Date			
Sorrower Signature		Date	Politor	AGL Sifluring						
30110 Mg1 218112221 -				one or Work No: (	3					
Home Phone No: ()		All	Gillians Li	DIRECTION DO NOT E	AYI					
	IUST RETUR	N THIS FORM (NO	TA COPY	BY MAIL DO NOT F	3-12-12			· · · · · · · · ·		
		MINT SIGN A	u =AiTTH	DRIZATION TO RELE	LSE IN	FORMA	TION"	FORM	3550-1	
1. ALL ADULT HOUSEH	HOLD MEMB	ERS MUSI SIGN M	M MOIII							
2. PLEASE FILL OUT TO	HE FOLLOW	ING SECTION COL	<b>IPLETEL</b>	Y:			FULL		T	
HOUSEHOLD MEMB	ca's R	LATIONSHIP	AGE		EMPLO	WED	STU		DISA	3LED
FULL NAME - SEGIN	—·· -	THE HEAD	•	NUMBER	YES			/NO	YES/NO	
FULL NAME - DEGIN	Asirso				· 写			X		X
YOURSELF Poleicia M. Re	Jack 5E	LF			م ،		-			
PORICIO III										<u> </u>
					-			Ĺ	<u> </u>	<del> </del>
				1				4	1	
								ļ	ļ	-
								<u> </u>		
FOR ALL ADU	ilt househ	OLD MEMBERS W	HO FILED	DO NOT SEND FOR	CPB MF					
YOU MUST IN	ilt househ	OLD MEMBERS W	HO FILED	DO NOT SEND FOR	CPB MF					
YOU MUST IN	ilt househ	OLD MEMBERS W	HO FILED	o. DO NOT SEND FOI loyed? YEAR'S FEDERAL INC	7M 845 COME 1	ax sc	HEDUI	e fof		
FOR ALL ADU  4. Yes No_XE  IF YES	ILT HOUSEN s anyone livin YOU MUST !	OLD MEMBERS Wing in your household NCLUDE A COPY (	HO FILED I self-emp OF LAST	o. DO NOT SEND FOI loyed? YEAR'S FEDERAL INC	7M 845 COME 1		HEDUI	e fof		
YOU MUST IN FOR ALL ADU	LT HOUSEN S anyone livin YOU MUST	OLD MEMBERS Wing in your household NCLUDE A COPY ( Real Estate Taxes of	HO FILED I self-emp OF LAST ' lue each y	o, DO NOT SEND FOI loyed? YEAR'S FEDERAL INC Tear. (a)	7M 843 20ME 7 11 exem	AX SC	MEDUI paying	£ FOF		
4. Yes No Xis IF YES - 1	ILT HOUSEN S anyone limit YOU MUST I	OLD MEMBERS Wing in your household NCLUDE A COPY ( Real Estate Taxes of	HO FILED I self-emp OF LAST Iue each y	o, DO NOT SEND FOI loyed? YEAR'S FEDERAL INC YEAR. (ar	COME 1  COME 1  COME 1	AX SC pt from ave insi	HEDUI paying urance.	e for	COR	F.
4. Yes No Xis IF YES - 1	ILT HOUSEN S anyone limit YOU MUST I	OLD MEMBERS Wing in your household NCLUDE A COPY ( Real Estate Taxes of	HO FILED I self-emp OF LAST Iue each y	o, DO NOT SEND FOI loyed? YEAR'S FEDERAL INC YEAR. (ar	COME 1  COME 1  COME 1	AX SC pt from ave insi	HEDUI paying urance.	e for	COR	F.
YOU MUST IN FOR ALL ADU  4. Yes No_Xis_	LT HOUSEN s anyone livin YOU MUST!  Amount of  Amount of	OLD MEMBERS Wing in your household NCLUDE A COPY ( Real Estate Texes of  Property Insurance  RECENT AND CON	HO FILED I self-emp OF LAST Iue each y	o, DO NOT SEND FOI loyed? YEAR'S FEDERAL INC YEAR. (ar	COME 1  COME 1  COME 1	AX SC pt from ave insi	paying paying trance.	E FOF	I C OR	F.
YOU MUST IN FOR ALL ADU	LT HOUSEN s anyone livin YOU MUST!  Amount of  Amount of	OLD MEMBERS Wing in your household NCLUDE A COPY of Real Estate Taxes of Property Insurance RECENT AND CONTROL FOR EACH JOB:	HO FILED I self-emp OF LAST Iue each y paid each	o. DO NOT SEND FOR loyed? YEAR'S FEDERAL INC. ear. lar year. ~10 E PAY STUBS FOR A	COME 1 TO BEEN THE COME IN EXECUTE IN EXECUT	FAX SC pt from ave insi	HEDUI paying urance. DUR H	E FOF	COR	F.
YOU MUST IN FOR ALL ADU  4. Yes No Xis  IF YES - 1  5. \$ 2. 23. 77  6. \$ 134.00  7. ATTACH THE TWO COMPLETE THE I	LT HOUSEN s anyone livin YOU MUST!  Amount of  Amount of  (C) MOST!	OLD MEMBERS W  Ig in your trouschold  NCLUDE A COPY (  Real Estate Taxes of  Property Insurance  RECENT AND CON  FOR EACH JOB:  AMOUNT O	HO FILED I self-emp OF LAST I ue each y paid each ISECUTIV	o, DO NOT SEND FOI loyed? YEAR'S FEDERAL INC YEAR. (ar	COME 1 TO BEEN THE COME IN EXECUTE IN EXECUT	FAX SC pt from ave insi	HEDUI paying urance. DUR H	E FOF	I C OR	F.
4. Yes No_Xis IF YES 15. \$ 2.330.77  6. \$ 434.00  7. ATTACH THE TWO COMPLETE THE INTERPOLATION OF THE INTERP	Amount of (2) MOST S FOLLOWING	OLD MEMBERS Wing in your household NCLUDE A COPY of Real Estate Taxes of Property Insurance RECENT AND CONTROL FOR EACH JOB:	HO FILED I self-emp OF LAST ' lue each y paid each ISECUTIV F	DO NOT SEND FOR LOYAR'S FEDERAL INC.  BEAR'S FEDERA	COME 1 In exemic not he LL JOE	PAX SC pt from neve insi is IN YO DRESS	HEDUI paying urance. DUR H	E FOF	I C OR	F.
4. Yes No Xie IF YES - 15. \$ 2. 230. 77 6. \$ 434.00 7. ATTACH THE TWO COMPLETE THE IF HOUSEHOLD ME FULL NAME	Amount of (2) MOST (5) MOST (6) MOST (6	IGLD MEMBERS Wing in your household NCLUDE A COPY of Real Estate Taxes of Property Insurance RECENT AND CONFOR EACH JOB:  AMOUNT O YEARLY INCO	HO FILED I self-emp OF LAST I we each y paid each ISECUTIV F	DO NOT SEND FOR LOYAR'S FEDERAL INC.  BEAR'S FEDERA	XMET In exemine not h	pt from neve instance is in Year	HEDUI paying urance. DUR H	E FOF	I C OR	F.
4. Yes No Xie IF YES - 15. \$ 2. 230. 77 6. \$ 434.00 7. ATTACH THE TWO COMPLETE THE IF HOUSEHOLD ME FULL NAME	Amount of (2) MOST (5) MOST (6) MOST (6	IGLD MEMBERS Wing in your household NCLUDE A COPY of Real Estate Taxes of Property Insurance RECENT AND CONFOR EACH JOB:  AMOUNT O YEARLY INCO	HO FILED I self-emp OF LAST I we each y paid each ISECUTIV F	DO NOT SEND FOR LOYAR'S FEDERAL INC.  BEAR'S FEDERA	XMET In exemine not h	pt from neve instance is in Year	HEDUI paying urance. DUR H	E FOF	I C OR	F.
4. Yes No Xie IF YES - 15. \$ 2. 230. 77 6. \$ 434.00 7. ATTACH THE TWO COMPLETE THE IF HOUSEHOLD ME FULL NAME	Amount of (2) MOST (5) MOST (6) MOST (6	IGLD MEMBERS Wing in your household NCLUDE A COPY of Real Estate Taxes of Property Insurance RECENT AND CONFOR EACH JOB:  AMOUNT O YEARLY INCO	HO FILED I self-emp OF LAST I we each y paid each ISECUTIV F	DO NOT SEND FOR LOYAR'S FEDERAL INC.  BEAR'S FEDERA	XMET In exemine not h	pt from neve instance is in Year	HEDUI paying urance. DUR H	E FOF	I C OR	F.
4. Yes No Xie IF YES - 15. \$ 2. 230. 77 6. \$ 434.00 7. ATTACH THE TWO COMPLETE THE IF HOUSEHOLD ME FULL NAME	Amount of (2) MOST (5) MOST (6) MOST (6	IGLD MEMBERS Wing in your household NCLUDE A COPY of Real Estate Taxes of Property Insurance RECENT AND CONFOR EACH JOB:  AMOUNT O YEARLY INCO	HO FILED I self-emp OF LAST ' lue each y paid each ISECUTIV F	DO NOT SEND FOR LOYER'S FEDERAL INC.  BEAR'S FEDERA	COME 1 In examino not hold to	PAX SC pt from the inst is IN YOU DRESS	paying urance.	E FOF	ICOR	P. ND ONE N
4. Yes No Xie IF YES - 15. \$ 2. 230. 77 6. \$ 434.00 7. ATTACH THE TWO COMPLETE THE IF HOUSEHOLD ME FULL NAME	Amount of (2) MOST (5) MOST (6) MOST (6	IGLD MEMBERS Wing in your household NCLUDE A COPY of Real Estate Taxes of Property Insurance RECENT AND CONFOR EACH JOB:  AMOUNT O YEARLY INCO	HO FILED I self-emp OF LAST ' lue each y paid each ISECUTIV F	DO NOT SEND FOR LOYAR'S FEDERAL INC.  BEAR'S FEDERA	COME 1 In exemination of the LL JOE INDADI	pt from eve inst is in You ORESS	paying urance.	E FOF	ICOR	P. ND ONE N
4. Yes No Xie IF YES - 15. \$ 2. 230. 77 6. \$ 434.00 7. ATTACH THE TWO COMPLETE THE IF HOUSEHOLD ME FULL NAME	Amount of (2) MOST (5) MOST (6) MOST (6	IGLD MEMBERS Wing in your household NCLUDE A COPY of Real Estate Taxes of Property Insurance RECENT AND CONFOR EACH JOB:  AMOUNT O YEARLY INCO	HO FILED I self-emp OF LAST ' lue each y paid each ISECUTIV F	DO NOT SEND FOR LOYER'S FEDERAL INC.  BEAR'S FEDERA	COME 1 In exemination of the LL JOE INDADI	pt from eve inst is in You ORESS	paying urance.	E FOF	I C OR	P. ND ONE N
4. Yes No Xie IF YES - 15. \$ 2. 230. 77 6. \$ 434.00 7. ATTACH THE TWO COMPLETE THE IF HOUSEHOLD ME FULL NAME	Amount of (2) MOST (5) MOST (6) MOST (6	IGLD MEMBERS Wing in your household NCLUDE A COPY of Real Estate Taxes of Property Insurance RECENT AND CONFOR EACH JOB:  AMOUNT O YEARLY INCO	HO FILED I self-emp OF LAST ' lue each y paid each ISECUTIV F	DO NOT SEND FOR LOYAR'S FEDERAL INC.  BEAR'S FEDERA	COME 1 In exemination of the LL JOE INDADI	pt from eve inst is in You ORESS	paying urance.	E FOF	ICOR	P. ND ONE N
4. Yes No Xie IF YES - 15. \$ 2. 230. 77 6. \$ 434.00 7. ATTACH THE TWO COMPLETE THE IF HOUSEHOLD ME FULL NAME	Amount of (2) MOST (5) MOST (6) MOST (6	IGLD MEMBERS Wing in your household NCLUDE A COPY of Real Estate Taxes of Property Insurance RECENT AND CONFOR EACH JOB:  AMOUNT O YEARLY INCO	HO FILED I self-emp OF LAST ' lue each y paid each ISECUTIV F	DO NOT SEND FOR LOYAR'S FEDERAL INC.  BEAR'S FEDERA	COME 1 In exemination of the LL JOE INDADI	pt from eve inst is in You ORESS	paying urance.	E FOF	ICOR	P. ND ONE N

According to the Paparwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0575-0172. The time required to complete this information collection is estimated to average 30 minutes per response, including the control number for this information, controlled the collection of information. Information instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

Form RD 3550-21 (03-08)

# RURAL HOUSING SERVICE PAYMENT SUBSIDY RENEWAL CERTIFICATION

FORM APPROVED OMB NO. 0575-0172

B) P/	VAMEN I 2002IN I	A SECTION	•					
	RE	CENCE			0	13/06/13		
PATRICIA M RODGER P206 EELPOT ROAD	HAI	26 765	8K					
IAPLES NY 14512	EFA	AB/ ?						
he information I (we) have provide round to the second collection of th	7010 029 ided is complete and tru ted to determine if I am ulformation can result in 3/18/13	e to the to (we are) e criminal a	est of my (our) knowled; ligible to receive payme and civil penalties.  ower Signature	ge. 1 (we) i ent subsidie	understa es and th	ate	} } 	
orrower Signature  Ome Phone No: (586) 574	6992 TURN THIS FORM (NO	liternate P OT A COP	hone of Work No: (22) Y) BY MAIL, DO NOT I	FAXI	-0.2	<u> </u>		
YOU MUST HE I. ALL ADULT HOUSEHOLD M	EMBERS MUST SIGN	AN "AUTI	ORIZATION TO RELE	ASE INFO	RMATIC	N' FORM	3550-1	
PLEASE FILL OUT THE FOL	LOWING SECTION CO	MIPLE	E/14	T	FI	ILL TIME	T	
HOUSEHOLD MEMBER'S	HETATIONSUIL		SOCIAL SECURITY NUMBER			TUDENT	DISABLED YES/NO	
FULL NAME - BEGIN WITH YOURSELF	TO THE HEAD					ES/NO	X	
Bericia M. Rochall	SELF	Ŧ	,					
				<del> </del>				
			-				<del> </del>	
		1						
3. Yes X No Did anyo YOU MUST INCLUDE FOR ALL ADULT HOU 4. Yes No X is anyone IF YES - YOU ML	ne fiving in your houself A COPY OF LAST YEA ISEHOLD MEMBERS V Is living in your househol IST INCLUDE A COPY	VHO FILE	D. DO NOT SEND FOR ployed? 'YEAR'S FEDERAL INC	RM 8453!!! COME TAX	SCHEI	JULE FOR		
- 2 200 JS Amou	nt of Real Estate Taxes	due each	year. la	m exempt i io not have	tom bay	ing.		
6. \$ <u>475.00</u> Amou	nt of Property Insurance	paid eac NSECUTI					IOLD AND	
7. ATTACH THE TWO (2) NO COMPLETE THE FOLLOW	ANG TON DESCRIPTION		EMPLOYER NAME A	ND ADDRE	ss	EMPLOYE	ER PHONE N	
HOUSEHOLD MEMBER'S	YEARLY INCO	OME						
	) 18,720.	00	Rehabilitation, Co AND assessment 1140 PHS ford	Victor		(585) 5	586 - <del>6</del> 87	
Botaicia M. Rodger	10,100.	<u> </u>	Fitsford, NY 15	+534		, ,		

\*\*\* COMPLETE 2ND PAGE OF THIS FORM \*\*\*

According to the Paparwark Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0575-0172. The time required to complete this information is estimated to average 30 minutes per response, including the control number for this information collection is 0575-0172. The time required to complete this information and reviewing the collection of information. It is not controlled in the collection of information.

Form RD 3550-21 (03-05)

### **RURAL HOUSING SERVICE** PAYMENT SUBSIDY RENEWAL CERTIFICATION

FORM APPROVED OMB NO.0575-0172

09/13/13

PATRICIA II RODGER 7206 EELPOT ROAD NY 14512 NAPLES

7010 6740 0001 7364 1002

Please provide the following information in ink. IF ANY REQUESTED INFORMATION IS NOT PROVIDED, YOUR PAYMENT SUBSIDY REQUEST CANNOT BE PROCESSED!

information I (we) have provide remation below is being collected wide complete and accurate information. Make we will be a second to the complete and accurate information.	ormation can result in				_/	0/30/	13		
A A	866- Date		wer Signature		•				
ne Phone No: (38) 37	TURN THIS FORM (NO	NT A COP	none or Work No: (_ V) BY MAIL DO NOT	FAXI			: FARM	acen.1	
ALL ADMIT HOUSEHOLD ME	MBERS MUST SIGN	AN "AUTH	IORIZATION TO REL .Y:	EASE IN	FORMA	TION	FURIN	3330-1	
PLEASE FILL OUT THE FOLI HOUSEHOLD MEMBER'S	RELATIONSHIP TO THE HEAD	AGE	SOCIAL SECURIT NUMBER	EMPL		FULL	DENT	DISAE YES/	
FULL NAME - BEGIN WITH YOURSELF		<u>_</u> -		VFS	NO   X	YES	/ NO	Z	170
2 Matricia M. Rodine	SELF								
					ļ	-	<u> </u>		L L
				_	+		<u> </u>		
	The second features	hold file Fe	derai income Taxias	t year?					l
JAN MINET INCLUDE	COLLOR COM		_ へんいハナミだが 手	CAM 845	, ORTI	HEDU!	E TAX	RECOF	ios
YOU MUST INCLUDE A FOR ALL ADULT HOU IS YES YOU MU	SEHOLD MEMBERS I living in your househo IST INCLUDE A COPY It of Fieel Estate Texas	wito file old self-emi of LAST due each	D. DO NOT SEND F ployed? YEAR'S FEDERAL! YEAR.	NCOME 1 am exem	FAX SC apt from nave ins	HEDUI paying urance.	E FOI	3 C OR	F.
YOU MUST INCLUDE A FOR ALL ADULT HOU I. Yes No X is anyone IF YES — YOU MU  5. \$ 1660. 61 Amount  6. \$ 463.00 Amount	SEHOLD MEMBERS I liking in your housels IST INCLUDE A COPY It of Real Estate Texas Int of Property Insurance THE RECENT AND CO	WHO FILE old self-emp of LAST due each e paid each ensecutives	D. DO NOT SEND F ployed? YEAR'S FEDERAL! Year. h year. VE PAY STUBS FOR	ORM 845 NCOME am exem I do not h	FAX SC apt from mave ins 3S IN Y	HEDUI paying wance. OUR H	E FOI	COR	P. ND
YOU MUST INCLUDE A FOR ALL ADULT HOU IS YES YOU MU	SEHOLD MEMBERS I liaring in your bouselon ist INCLUDE A COPY at of Real Estate Texas at of Properly Insurance OST RECENT AND CO VING FOR EACH JOB	WHO FILE old self-emply OF LAST due each e paid each NSECUTIVE COF	D. DO NOT SEND F ployed? YEAR'S FEDERAL! YEAR.	ORM 845 NCOME am exem I do not h	FAX SC apt from mave ins 3S IN Y	HEDUI paying wance. OUR H	E FOI	3 C OR	P. ND
YOU MUST INCLUDE A FOR ALL ADULT HOU  FOR ALL ADULT HOU  IF YES — YOU MU  S. \$	SEHOLD MEMBERS Taking in your bousehord in your bousehord in Copy at of Papel Estate Taxes at of Properly Insurance OST RECENT AND COVING FOR EACH JOB AMOUNT YEARLY INC	WHO FILE old self-emp of LAST due each e paid each ensecutive come	D. DO NOT SEND F ployed? YEAR'S FEDERAL! YEAR'S FEDERAL! NYEAR'S FEDERAL! WE PAY STUBS FOR EMPLOYER NAME	NCOME: am exem I do not h ALL JOI	FAX SC apt from mave ins 3S IN Y	HEDUI paying wance. OUR H	E FOI	COR	P. ND
FOR ALL ADULT HOU  Yes No X is anyone IF YES YOU MU  S. S 1660 6 Amount  6. S 462 00 Amount  7. ATTACH THE TWO (2) MC COMPLETE THE FOLLOW  HOUSEHOLD MEMBER'S FULL NAME	SEHOLD MEMBERS Taking in your bousehord in your bousehord in Copy at of Papel Estate Taxes at of Properly Insurance OST RECENT AND COVING FOR EACH JOB AMOUNT YEARLY INC	WHO FILE old self-emp of LAST due each e paid each ensecutive come	D. DO NOT SEND F ployed? YEAR'S FEDERAL! year. h year. VE PAY STUBS FOR EMPLOYER NAME	ORM 845 NCOME: am exem I do not h ALL JOI AND AD	PAX SC apt from ave ins 38 IN Y	HEDUI paying wrance OUR H	OUSEI	COR	F. ND DNE NO

\*\*\* COMPLETE 2ND PAGE OF THIS FORM \*\*\*

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is estimated to average 30 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

Form AD 3550-21 (03-06)

### **RURAL HOUSING SERVICE** PAYMENT SUBSIDY RENEWAL CERTIFICATION

FORM APPROVED OMB NO.0575-0172

PATRICIA M RODGER

RECEIVED

APR 14 7014

03/21/14

1
The second of the late of the
-
-
1 * 10 TO SERVICE
-
Committee Contractor
100000

	NY 14512	•		ELWINELS						
		nation in ink. IF ANY RI	EQUESTE	d information is n	OT PRO	OVIDE	),			
ase provide	the following inform	NEST CANNOT BE P	ROCESSE	Di						
<b>URPAYME</b>	NT SUBSIDIT REG	OED! ORDIO			# ham	at unde	ectand (	hat the	)	
	A family bears storage	led is complete and trued to determine if I am (	e to the be	at of my (our) knowledk	je. 1 (Wi	elioe su	ristini Tari	alure l	D	
e information	i feel more bose	ed to determine if I am (	we are) eli	gible to receive payme	lif Snow	Girth wa				
ormation bek	to end accurate inf	ed to determine it said to committee can result in committee can result in committee can result in committee can be committeed as a committee can be committed as a committee can be committeed as a committee can be committed.	riminal an	d civil penalties.						
		olo, lid						<del></del>		
	1. Rocker	3/31/14 Date	Borro	wer Signature			Date			
nower Signa	ture	9079 A		_		. e				
	LOK 631	9039 A	iternate Pi	one or Work No: (		<u> </u>	,	-		
me Phone N	o: ( <u>383) 231-</u>	TURN THIS FORM (NO	T A COPY	BY MAIL DO NOT F	FAXI					
	YOU MUST RE	INHM IUIS LOUW 61-		·	ace ini	ORMA	TION"	FORM	3550-1	1
A1 4 APRIL 4	HOUSEHOLD ME	MBERS MUST SIGN	HTUA" NA	ORIZATION TO MELE	Prefilie 1140	die drags.				
ALL ADVL	HANDRIGHT IN	OWING SECTION CO	MPLETEL	Y:			FULL	TEUE	<u> </u>	<del></del>
PLEASE FI	LL OUT THE PULL	RELATIONSHIP	AGE	SOCIAL SECURITY	EMPLO	·VEC	STUE		DISA	BLED
HOUSEHO	D MEMBER'S	TO THE HEAD	1	NUMBER	YES		YES			NO
5.004 8E	E - BEGIN WITH		J		150	I Y			IX.	Ļ
YUUP	on Rodge	SELF	·	<del>-</del>					ļ <u>`</u>	+
PATELCE	A A B C C C C C C C C C C C C C C C C C		<del>                                     </del>			<u> </u>		<del> </del>	1-	士
					┼	 !			-	
					1					-
	The second secon									
			<del></del>					<u> </u>		1
						I		<u>i</u>	1	1
	No. Did anun	ne living in your housel	hold file Fe	deral income Tax last )	ear?	OR T	ELEFILI	ETAX	RECO	ADS
a. Yes X	No_Did anyo	ne tiving in your housel	hold file Fe	deral income Tax last y ORM(5) 1040, 1040EZ	eer? , 1040A	, OR TI	ELEFIL	ETAX	RECO	RDS
245	MUST INCLUDE	SEHOLD MEMBERS V	NHO FILE	D. DO NOT SEND FO	RM 845					
245	MUST INCLUDE	SEHOLD MEMBERS V	NHO FILE	D. DO NOT SEND FO	RM 845					
245	MUST INCLUDE	SEHOLD MEMBERS V	NHO FILE	D. DÖ NOT SEND FO Noved? YEAR'S FEDERALIN	RM 845 COME 1	ax sc	HEDUL	E FOF		
FOR	ALL ADULT HOU  No X is anyone IF YES - YOU MU	SEHOLO MEMBERS V I living in your househo IST INCLUDE A COPY	NHO FILE Id self-emp OF LAST	o. Dò NOT SEND FO Noved? YEAR'S FEDERALIN	RM 845 COME 1	ax sc	HEDUL	E FOF		
FOR 4. Yes	MUST INCLUDE ALL ADULT HOU  No X is anyone IF YES - YOU MU  1, 2, 7 4 Anous	A COPY OF EAST SEHOLD MEMBERS V I living in your househo IST INCLUDE A COPY Int of Real Estate Taxes	WHO FILE Id self-emp OF LAST due each	D. DÖ NOTSEND FO Noyed? YEAR'S FEDERALIN YEAR.   2	RM 845 COME T m exem	AX SC	HEDUL paying	E FOF		
FOR 4. Yes 5. \$3	MUST INCLUDE ALL ADULT HOU NO X is anyone IF YES - YOU MU	A COPY OF LANGERS V SEHOLD MEMBERS V I living in your househo IST INCLUDE A COPY at of Real Estate Taxes	WHO FILE ld self-emp OF LAST due each	D. DO NOT SEND FO. Noyed? YEAR'S FEDERALIN YEAR.	RM 845 COME 1 m exem to not h	AX SC pt from eve ins	HEDUL paying urance.	E FOF	COR	F.
FOR 4. Yes 5. \$3	MUST INCLUDE ALL ADULT HOU NO X is anyone IF YES - YOU MU	A COPY OF LANGERS V SEHOLD MEMBERS V I living in your househo IST INCLUDE A COPY at of Real Estate Taxes	WHO FILE ld self-emp OF LAST due each	D. DO NOT SEND FO. Noyed? YEAR'S FEDERALIN YEAR.	RM 845 COME 1 m exem to not h	AX SC pt from eve ins	HEDUL paying urance.	E FOF	COR	F.
FOR 6. Yes 5. \$	MUST INCLUDE  ALL ADULT HOU  No X is anyone  IF YES - YOU MU  63.84 Amount  24.00 Amount  18 Amount  19 Amount	SEHOLD MEMBERS V  i living in your househo IST INCLUDE A COPY  It of Real Estate Taxes Int of Property Insurance THE TRECENT AND CO	NHO FILE: Id self-emp OF LAST due each e paid eacl NSECUTI	D. DO NOT SEND FOR A S	COME To exem do not h	pt from eve ins	HEDUL paying urance. OUR H	E FOF	C OR	F.
FOR 6. Yes 5. \$	MUST INCLUDE  ALL ADULT HOU  No X is anyone  IF YES - YOU MU  63.84 Amount  24.00 Amount  18 Amount  19 Amount	A COPY OF LASERS VISEHOLD MEMBERS VISIT INCLUDE A COPY at of Real Estate Taxes at of Property Insurance OST RECENT AND COVING FOR EACH JOB:	WHO FILE Id self-emp OF LAST due each e paid eacl NSECUTI	D. DO NOT SEND FOR A S	COME To exem do not h	pt from eve ins	HEDUL paying urance. OUR H	E FOF	COR	F.
FOR 6. Yes 6. \$ 6. \$ 7. ATTACI COMPL	MUST INCLUDE ALL ADULT HOU NO X is anyone IF YES — YOU MU 63.84 Amount HTHE TWO (2) MK ETE THE FOLLOW	SEHOLD MEMBERS V  I living in your househo IST INCLUDE A COPY  IN OF Real Estate Taxes IN OF Property Insurance OST RECENT AND CO VING FOR EACH JOB:  AMOUNT	WHO FILE Id self-emp OF LAST due each e paid each NSECUTI	D. DO NOT SEND FO. Noyed? YEAR'S FEDERALIN YEAR.	COME To exem do not h	pt from eve ins	HEDUL paying urance. OUR H	E FOF	C OR	F.
FOR 4. Yes 5. \$	MUST INCLUDE  ALL ADULT HOU  No X is anyone  IF YES - YOU MU  63.84 Amount  24.00 Amount  18 Amount  19 Amount	SEHOLD MEMBERS VI SEHOLD MEMBERS VI I living in your househo IST INCLUDE A COPY Int of Real Estate Taxes Int of Property Insurance OST RECENT AND CO VING FOR EACH JOB:	NHO FILE Id self-emp OF LAST due each e paid each NSECUTIVE OF	D. DO NOT SEND FOR A S	COME To mexem do not had a JOE	CAX SC In the state of the stat	HEDUL paying urance. OUR H	E FOF	C OR	F.
FOR 4. Yes 5. \$	MUST INCLUDE  ALL ADULT HOU  No X is anyone  IF YES - YOU MU  63.84 Amous  24.02 Amous  H THE TWO (2) MC  ETE THE FOLLOW  HOLD MEMBER'S	SEHOLD MEMBERS V  I living in your househo IST INCLUDE A COPY In of Real Estate Taxes Int of Property Insurance OST RECENT AND CO VING FOR EACH JOB:  AMOUNT YEARLY INC.	WHO FILE Id self-emp OF LAST due each e paid each NSECUTIVE OF	DO NOT SEND FOR A SEND FOR A REPROPER NAME A	COME To mexem do not have a larger to the la	pt from eve ins IS IN Y DRESS	paying paying urance.	E FOF	I C OR	AND
5. \$ 4. 3. 4. 7. ATTACI COMPL	MUST INCLUDE ALL ADULT HOU  No X is anyone IF YES - YOU MU  63.84 Amount  24.00 Amount  H THE TWO (2) MK  ETE THE FOLLOW  HOLD MEMBER'S  FULL NAME	SEHOLD MEMBERS VI it living in your househouse in the Copy at of Real Estate Taxes and of Property Insurance OST RECENT AND CO VING FOR EACH JOB: AMOUNT YEARLY INC.	WHO FILE Id self-emp OF LAST due each e paid each NSECUTIVE OF OME	O. DO NOT SEND FOR A YEAR'S FEDERALING YEAR'S FEDERALING YEAR. IT YEAR. IT YEAR STUBS FOR A EMPLOYER NAME A REHR DILL TO TOTAL TO THE A TOTAL TO THE A TOTAL TO THE A TOTAL TO	COME To mexem do not have a common to ha	pt from ave insus IN Y	paying paying urance.	E FOF	C OR	AND
5. \$ 4. 3. 4. 7. ATTACI COMPL	MUST INCLUDE ALL ADULT HOU  No X is anyone IF YES - YOU MU  63.84 Amount  24.00 Amount  H THE TWO (2) MK  ETE THE FOLLOW  HOLD MEMBER'S  FULL NAME	SEHOLD MEMBERS VI SEHOLD MEMBERS VI I living in your househo IST INCLUDE A COPY Int of Real Estate Taxes and of Property Insurance OST RECENT AND CO VING FOR EACH JOB: AMOUNT YEARLY INC	MHO FILE Id self-emp OF LAST due each e paid each NSECUTIVE OF OME	DO NOT SEND FOR MOYERS FEDERALING PEAR'S FEDERALING PEAR.  I YEAR'S FEDERAL	COME 1 m exem do not h stl JOE ND ADI	pt from ave ins IN Y	paying paying urance.	E FOF	I C OR	AND
5. \$ 4. 3. 4. 7. ATTACI COMPL	MUST INCLUDE  ALL ADULT HOU  No X is anyone  IF YES - YOU MU  63.84 Amous  24.02 Amous  H THE TWO (2) MC  ETE THE FOLLOW  HOLD MEMBER'S	SEHOLD MEMBERS VI it living in your househouse in the Copy at of Real Estate Taxes and of Property Insurance OST RECENT AND CO VING FOR EACH JOB: AMOUNT YEARLY INC.	MHO FILE Id self-emp OF LAST due each e paid each NSECUTIVE OF OME	DO NOT SEND FOR MOYERS FEDERALING PEAR'S FEDERALING PEAR.  I YEAR'S FEDERAL	COME 1 m exem do not h stl JOE ND ADI	pt from ave ins IN Y	paying paying urance.	E FOF	I C OR	AND
5. \$ 4. 3. 4. 7. ATTACI COMPL	MUST INCLUDE ALL ADULT HOU  No X is anyone IF YES - YOU MU  63.84 Amount  24.00 Amount  H THE TWO (2) MK  ETE THE FOLLOW  HOLD MEMBER'S  FULL NAME	A COPY OF DEMBERS VISEHOLD MEMBERS VISEHOLD MEMBERS VISEHOLD MEMBERS VISEHOLD MEMBERS VISEHOLD A COPY OF THE COPY	WHO FILE Id self-emp OF LAST due each e peid each NSECUTIVE OME	O. DO NOT SEND FOR A YEAR'S FEDERALING YEAR'S FEDERALING YEAR. IT YEAR. IT YEAR STUBS FOR A EMPLOYER NAME A REHR DILL TO TOTAL TO THE A TOTAL TO THE A TOTAL TO THE A TOTAL TO	COME 1 m exem do not h stl JOE ND ADI	pt from ave ins IN Y	paying paying urance.	E FOF	I C OR	AND
5. \$ 4. 3. 4. 7. ATTACI COMPL	MUST INCLUDE ALL ADULT HOU  No X is anyone IF YES - YOU MU  63.84 Amount  24.00 Amount  H THE TWO (2) MK  ETE THE FOLLOW  HOLD MEMBER'S  FULL NAME	SEHOLD MEMBERS VI SEHOLD MEMBERS VI I living in your househo IST INCLUDE A COPY Int of Real Estate Taxes and of Property Insurance OST RECENT AND CO VING FOR EACH JOB: AMOUNT YEARLY INC	WHO FILE Id self-emp OF LAST due each e peid each NSECUTIVE OME	DO NOT SEND FOR MOYERS FEDERALING PEAR'S FEDERALING PEAR.  I YEAR'S FEDERAL	COME 1 m exem do not h stl JOE ND ADI	pt from ave ins IN Y	paying paying urance.	E FOF	I C OR	AND

\*\*\* COMPLETE 2ND PAGE OF THIS FORM \*\*\*

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a velid OMB control number. The valid OMB control number for this information collection is 0575-0172. The time required to complete this information collection is estimated to average 30 minutes per response, including the time for reviewing first information collection of information.

Form RD 3550-21 (03-06)

# RURAL HOUSING SERVICE PAYMENT SUBSIDY RENEWAL CERTIFICATION

FORM APPROVED OMB NO. 0575-0172

PATRICIA M RODGER J206 EELPOT ROAD NAPLES NY 14512 TH 03 ME ()

11/11/14

Please provide the following information in Ink. IF ANY REQUESTED INFORMATION IS NOT PROVIDED, YOUR PAYMENT BUBSIDY REQUEST CANNOT BE PROCESSED!

The information I (we) have provided is complete and true to the best of my (our) knowledge. I (we) understand that the information below is being collected to determine if I am (we are) eligible to receive payment subsidies and that failure to provide complete and accurate information can result in criminal and civil penalties.

Patricia M. Rodger Borrower Signature	11/31/14 Date	Berrower Signature	Date
Home Phone No: (35) 58/-		nate Phone or Work No: (	

1. ALL ADULT HOUSEHOLD MEMBERS MUST SIGN AN "AUTHORIZATION TO RELEASE INFORMATION" FORM 3550-1

2. PLEASE FILL OUT THE FOLLOWING SECTION COMPLETELY:

PLEASE FILL OUT THE FOLI HOUSEHOLD MEMBER'S FULL NAME - BEGIN WITH YOURSELF	RELATIONSHIP TO THE HEAD	AGE	SOCIAL SECURITY	EMPL YES		FULL STUI YES	ENT	DISAL YES	
Notneid M. Radgel	SELF				×		<u>×</u>		
		<u> </u>	<u> </u>	1	<u> </u>	l	<u></u>	<u> </u>	L

- 3. Yes \_\_\_\_\_ No \_\_ Did anyone living in your household file Federal Income Tax last year?
  YOU MUST INCLUDE A COPY OF LAST YEAR'S IRS FORM(S) 1040, 1040EZ, 1040A, OR TELEFILE TAX RECORDS
  FOR ALL ADULT HOUSEHOLD MEMBERS WHO FILED. DO NOT SEND FORM 8453!!!
- 4. Yes \_\_\_ NoX is anyone living in your household self-employed?

  IF YES \_ YOU MUST INCLUDE A COPY OF LAST YEAR'S FEDERAL INCOME TAX SCHEDULE FOR C OR F.
- 5. 3 3040. 80 Amount of Real Estate Taxes due each year.

I am exempt from paying.

5. \$ 422.00

Amount of Property insurance paid each year.

I do not have insurance. .

7. ATTACH THE TWO (2) MOST RECENT AND CONSECUTIVE PAY STUBS FOR ALL JOBS IN YOUR HOUSEHOLD AND
- COMPLETE THE FOLLOWING FOR EACH JOB:

HOUSEHOLD MEMBER'S FULL NAME	AMOUNT OF YEARLY INCOME	EMPLOYER NAME AND ADDRESS	EMPLOYER PHONE NO.
Patricia M. Rodger	\$ 9.612.00	Rohuse	( ) NA
	4811-Mas	6ross	( )
	9, 804. Net:		( )

\*\*\* COMPLETE 2ND PAGE OF THIS FORM \*\*\*

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid ONB control number. The valid ONB control number for this information collection is 0575-0172. The time required to complete this information collection is estimated to average 30 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintening the data needed, and completing and reviewing the collection of information.

Form RD 3550-21 (03-06)

### RURAL HOUSING SERVICE PAYMENT SUBSIDY RENEWAL CERTIFICATION

FORM APPROVED OMB NO. 0575-0172

05/11/15

PATRICIA M RODGER 7206 EELPOT ROAD

7206 EELPOT ROA NAPLES	AD NY 14512			THE GESTION	1 1			
				The second secon	IOT DECIMA	₹D.		
YOUR PAYMENT	SUBSIDY HELD	\$21 PHIMO: PE.	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	ED INFORMATION IS N EDI				
The information i (vinlormation below is	ne) have provided a being collected	d is complete and in to determine if I am mation can result in	ue to the b (we are) e criminal ar	est of my (our) knowled digible to receive payme nd civil penalties.	lge. I (we) un mt subsidies t	jerstand its and that fail	at the ure to	
provide complete a	nd accurate union	- 5/35/15					-	
Swrower Signature	!	Care		ower Signature		Date		
	~ A 621	9679 A	Atternate P	hone or Work No: (	<u>) - </u>			
v	MINIST RETU	IRN THIS FORM (N	O! A COP	Albi war parter.	•••			24
1. ALL ADULT HO	USEHOLD MEM	BERS MUST SIGN	AN 'AUTH	IORIZATION TO RELE	ASE INFORM	ATION' FC	)RM 355	(J-1
2. PLEASE FILL O	OUT THE FOLLO	wing Section Co	DMPLETEL	LY: SOCIAL SECURITY		FULL TIN	ME	
HOUSEHOLD M FULL NAME - B	MEMBER'S F	RELATIONSHIP TO THE HEAD	AGE	I AAA MARKATAN TANAHA T	EMPLOYED	1	nt dis	SABLED ES/NO
YOURSEL	F		+	1	YES/NO		× 15	<b>丁</b> 太
Potricia M.	Reger S	<u>EUF</u>	1		+	H		
			<u> </u>		<b>二</b>	丰丰	干	
						士士		1
			士二					
YOU MUS	ADULT HOUSE	HOLD MEMBERS V	NHO FILE	deral income Tax last yo ORM(S) 1040, 1040EZ, D. DO NOT SEND FOF ployed?	RM 8453!!!			
if Yi	ES YOU MUST	Minimum					-UN & U	14B 5 +
5 2 2023	. 53 Amount of	i Real Estate Taxes	due each j	,	m exempt from			
11.52		s manager incurrence	a naid aach	vear. fd	io not have ins			ALISE
- ATTACH THE	TWO (2) MOST	RECENT AND COR G FOR EACH JOB:	nsecutiv :	/E PAY STUBS FOR AI			SEMOLD	AND .
HOUSEHOLI	D MEMBER'S NAME	AMOUNT O	DF	EMPLOYER NAME AN	ND ADDRESS	EMPL	UYERFI	HONE NO
Į.	M. Radget.			_		(	<u>)</u>	
THERESON						,	1	
1				·			1	

COMPLETE THE FOLLOWING F HOUSEHOLD MEMBER'S FULL NAME	AMOUNT OF YEARLY INCOME	EMPLOYER NAME AND ADDRESS	EMPLOYER PHONE NO.
Patricia po Radger			( )
			( )
and the second s			(

\*\*\* COMPLETE 2ND PAGE OF THIS FORM \*\*\*

According to the Paparwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0575-0172. The time required to complete this information collection is estimated to average 30 minutes per response, including the time for reviewing instructions, searching existing data sources, gethering and maintaining the data needed, and completing and reviewing the collection of information.





FORM RECD 1944-14

UNITED STATES DEPARTMENT OF AGRICULTURE

FORM APPROVED OMB NO. 0575-0172

RURAL HOUSING SERVICE

PAYMENT ASSISTANCE/DEFERRED MORTGAGE ASSISTANCE AGREEMENT AGRMT TYPE: NEW

EFFECTIVE: 11/10/02

PAYMENT PLAN: MONTHLY

ACCOUNT NUMBER

NOTE DATE 10/10/02

NOTE MOUNT 85,900.00

MON INSTLMNT AT NOTE RATE 541.98

MONTHLY PAYMENT 296.50

MONTHLY PAYMENT ASSISTANCE 245.48

- THIS AGREEMENT BETWEEN THE UNITED STATES OF AMERICA, ACTING THROUGH THE RURAL HOUSING SERVICE (RHS) PURSUANT TO SECTION 521 OF THE HOUSING ACT OF 1949, (CALLED "THE GOVERNMENT") AND THE BORROWER WHOSE NAME APPEARS BELOW (CALLED "THE BORROWER") SUPPLEMENTS PROMISSORY NOTES OR ASSUMPTION (CALLED "THE BORROWER") SUPPLEMENTS PROMISSORY NOTES OR ASSUMPTION AGREEMENTS (CALLED "THE NOTE" WHETHER ONE OR MORE) FROM BORROWER TO THE GOVERNMENT AS DESCRIBED ABOVE. 1.
- AS OF 03/29/02 ADJUSTED FAMILY INCOME LIMITS FOR ONTARIO COUNTY MEDIAN: \$38,400 MODERATE: \$36,250 LOW: \$30,750
- HOUSEHOLD AND INCOME INFORMATION TO BE COMPLETED BY THE BORROWER.

  COMPLETE THE FOLLOWING FOR BORROWER, CO-BORROWER, AND ALL ADULT MEMBERS OF . 3. THE HOUSEHOLD WHO WILL RECEIVE INCOME.

### PLANNED INCOME NEXT 12 MONTHS

	NEAT 12	1-10-10 2-1-1-		TOTAL	OURCES OF INC	COME
NAME PATRICIA M. RODGER	AGE WAGES 55 19,232		NAMES & ADDRU SELF EMPLOYED			
	0 0	UDING FO	PIEK CITTURE	RESIDING	IN DWELLING	0
NUMBER OF DEPENDENT	. W \= \ \	(DWE	LLING ONLY)	369.00	-	

ANNUAL PROPERTY INSURANCE PREMIUM (DWELLING ONLY)

SIGNATURES OF BORROWERS: I (WE) CERTIFY THAT HOUSEHOLD AND FINANCIAL INFORMATION SUBMITTED TO RURAL HOUSING SERVICE IS CORRECT TO THE BEST OF MY (OUR) KNOWLEDGE AND HAVE READ AND UNDERSTOOD THE REQUIREMENTS AND CONDITIONS ON PAGES 2 AND 3 OF

NOTICE: FAILURE TO DISCLOSE ACCURATE AND TRUTHFUL FINANCIAL INFORMATION MAY RESULT IN THE TERMINATION OF PROGRAM ASSISTANCE CURRENTLY BEING RECEIVED, AND THE DENIAL OF FUTURE PROGRAM ASSISTANCE.

WARNING: SECTION 1001 OF TITLE 18, UNITED STATES CODE, PROVIDES: "WHOEVER, IN MATTER WITHIN THE JURISDICTION OF ANY DEPARTMENT OR AGENCY OF THE UNITED STATES CONCERNS OF THE UNITED STATES CODE. ANY MATTER WITHIN THE JURISDICTION OF ANY DEPARTMENT OR AGENCY OF THE UNITED STATES KNOWINGLY AND WILLFULLY FALSIFIES, CONCEALS OR COVERS UP BY ANY TRICK, STATEMEN, OR DEVICE A MATERIAL FACT, OR MAKES ANY FALSE, FICTITIOUS OR FRAUDULENT STATEMENTS OR REPRESENTATIONS, OR MAKES OR USES ANY FALSE WRITING OR DOCUMENT KNOWING THE SAME TO CONTAIN ANY FALSE, FICTITIOUS OR FRAUDULENT STATEMENT OR ENTRY; SHALL BE FINED UNDER THIS TITLE OR IMPRISONED NOT MORE THAN FIVE YEARS, OR BOTH " OR BOTH."

PATRICIA MORRO CER

(CO-BORROWER)





PAGE 2

FORM RECD 1944-14

UNITED STATES DEPARTMENT OF AGRICULTURE RURAL HOUSING SERVICE

PAYMENT ASSISTANCE/DEFERRED MORTGAGE ASSISTANCE AGREEMENT

INCOME & PAYMENT CALCULATIONS-TO BE COMPLETED BY RHS OFFICIAL OR DESIGNEE.

TOTAL ANNUAL INCOME 19,232.00 DEDUCTIONS ADJUSTED ANN INCOME 19,230.00

ADJUSTED ANNUAL INCOME EQUALS 50.07 % OF MEDIAN INCOME EQUIVALENT RATE OF INTEREST IS 2.0000 %

EQUIVALENT RATE OF INTEREST	296.50
MONTHLY INSTALLMENT BASED ON EQUIVALENT RATE OF INTEREST MONTHLY REAL ESTATE TAX PAYMENT MONTHLY PROPERTY INSURANCE PAYMENT MONTHLY PROPERTY ON EQUIVALENT RATE OF INTEREST	112.15 30.75 439.40
MONTHLY READ INSURANCE PAYMENT MONTHLY PROPERTY INSURANCE PAYMENT TOTAL PITI BASED ON EQUIVALENT RATE OF INTEREST	384.60
ADJUSTED INCOME X 24% / 12 MONTHLY NOTE RATE INSTALLMENT	541.98 296.50 245.48
MONTHLY PAYMENT ASSISTANCE MONTHLY PAYMENT ASSISTANCE	

5. SUBJECT TO THE PROVISIONS OF THIS AGREEMENT, THE BORROWER WILL PAY 296.50 DOLLARS PER MONTH FOR 24 MONTHS BEGINNING 11/10/02. THIS AGREEMENT MAY BE REVISED OR CANCELED AS PROVIDED BY THE CONDITIONS LISTED ON PAGE 3 OF THIS AGREEMENT.

PUBLIC REPORTING BURDEN FOR THIS COLLECTION OF INFORMATION IS ESTIMATED TO AVERAGE 20 MINUTES PER RESPONSE, INCLUDING THE TIME FOR REVIEWING INSTRUCTIONS, SEARCHING EXISTING DATA SOURCES, GATHERING AND MAINTAINING THE DATA NEEDED, AND COMPLETING AND REVIEWING THE COLLECTION OF INFORMATION. SEND COMMENTS REGARDING THIS BURDEN ESTIMATE OR ANY OTHER ASPECT OF THE COLLECTION OF INFORMATION, THIS BURDEN ESTIMATE OR ANY OTHER ASPECT OF THE COLLECTION OF AGRICULTURE, INCLUDING SUGGESTIONS FOR REDUCING THIS BURDEN, TO DEPARTMENT OF AGRICULTURE, CLEARANCE OFFICE, OIRM ROOM 404-W, WASHINGTON, D.C. 20250, AND TO THE OFFICE OF MANAGEMENT AND BUDGET, PAPERWORK REDUCTION PROJECT (OMB NO. 0575-0059), WASHINGTON, D.C. 20503.



PAGE 3

### FORM RECD 1944-14

## UNITED STATES DEPARTMENT OF AGRICULTURE

# PAYMENT ASSISTANCE/DEFERRED MORTGAGE ASSISTANCE AGREEMENT

DEFERRED PAYMENT CALCULATIONS

DATE OF INITIAL DEFERRED PAYMENT AGREEMENT: 00/00/00 \$0.00 TOTAL ANNUAL INCOME X 29% \$0.00 ANNUAL NOTE PAYMENT AT 1% MONTHLY DEFERRED PAYMENT MONTHLY DEFERRED ASSISTANCE \$0.00 \$0.00 ANNUAL REAL ESTATE TAXES \$0.00 ANNUAL PROPERTY INSURANCE \$0.00

AS REQUESTED BY THE GOVERNMENT, THE BORROWER WILL SUBMIT TO THE GOVERNMENT, IN A FORM PRESCRIBED OR APPROVED BY IT, A STATEMENT OF THE BORROWER'S TOTAL ANNUAL INCOME AND EXPENSES FOR THE PREVIOUS CALENDAR YEAR OR OTHER DESIGNATED PERIODS.

- THE GOVERNMENT MAY REVIEW THE BORROWER'S ANNUAL INCOME AND EXPENSES DURING THE TERM OF THIS AGREEMENT AND, IN ACCORDANCE WITH ITS REGULATIONS, MAY AT ITS DISCRETION INCREASE, DECREASE, OR CANCEL ANY AMOUNT OF PAYMENT ASSISTANCE OR DEFERRED MORTGAGE ASSISTANCE GRANTED UNDER THIS AGREEMENT. THE GOVERNMENT MAY ALSO DETERMINE WHETHER TO OFFER A NEW AGREEMENT FOR THE SUCCEEDING YEAR OR OTHER SELECTED PERIOD FOLLOWING THE PERIOD COVERED BY THIS AGREEMENT.
- AT ITS OPTION, THE GOVERNMENT MAY TERMINATE THIS AGREEMENT AT ANY TIME IT DETERMINES THAT: 9.
  - A. THE BORROWER HAS DEFAULTED UNDER ANY TERMS OR CONDITIONS OF THIS ING BUKKUMBK HAS DEFAULTED UNDER ANY TERMS OR COMPLETIONS OF THIS AGREEMENT, THE NOTE, OR ANY INSTRUMENT SECURING THE BORROWER'S LOAN
  - B. THE BORROWER HAS NEVER OCCUPIED THE DWELLING AND RHS WILL NOT CONTINUE

- C. THE BORROWER CEASES TO OCCUPY THE DWELLING.

  THE BORROWER CEASES TO OCCUPY THE DWELLING.

  THE PROPERTY SECURING THE LOAN OBLIGATION HAS BEEN SOLD OR THE TITLE

  TRANSFERRED WITHOUT THE GOVERNMENT'S CONSENT OR APPROVAL.

  TRANSFERRED WITHOUT THE GOVERNMENT'S CONSENT ASSISTANCE OR DEFERRED

  THE BORROWER IS NO LONGER ELIGIBLE FOR PAYMENT ASSISTANCE OR DEFERRED

  MORTGAGE ASSISTANCE.
- 10. DEFERRED PAYMENTS CANNOT BE GRANTED AFTER 15 YEARS FROM THE EFFECTIVE DATE OF THE INITIAL PAYMENT ASSISTANCE AGREEMENT. ALL DEFERRED PAYMENTS OUTSTANDING AT THE TIME THE PROPERTY IS SOLD OR TITLE TRANSFERRED ARE
- 11. THE GOVERNMENT MAY AMEND OR CANCEL THE AGREEMENT AND COLLECT ANY AMOUNT OF REDUCTION GRANTED WHICH RESULTED FROM INCOMPLETE OR INACCURATE INFORMATION, AN ERROR IN COMPUTATION, OR ANY OTHER REASONS WHICH RESULTED IN PAYMENT ASSISTANCE OR DEFERRED MORTGAGE ASSISTANCE THAT THE BORROWER WAS NOT ENTITLED TO RECEIVE
- 12. UPON THE FAILURE OF THE BORROWER TO MAKE THE PAYMENTS PRESCRIBED IN THIS AGREEMENT, THE GOVERNMENT, AT ITS OPTION AND SUBJECT TO ITS REGULATIONS, MAY DECLARE THE ENTIRE INDEPTEDNESS DUE TO THE GOVERNMENT IMMEDIATELY DUE AND
- 13. NO TERMS OR CONDITIONS OF THE NOTE OR ANY RELATED SECURITY INSTRUMENT, OTHER THAN THE AMOUNT OF PAYMENT OR THE PAYMENT PLAN, SHALL BE AFFECTED BY THIS
- 14. THIS AGREEMENT IS SUBJECT TO THE PRESENT REGULATIONS OF RHS AND TO ITS FUTURE REGULATIONS NOT INCONSISTENT WITH THE EXPRESS PROVISIONS OF THIS
- 15. FOR LOANS APPROVED OR ASSUMED ON OR AFTER OCTOBER 1, 1979, ANY PAYMENT ASSISTANCE GRANTED AS A RESULT OF THIS AGREEMENT SHALL BE SUBJECT TO RECAPTURE BY THE GOVERNMENT WHEN THE PROPERTY SECURING THE LOAN IS SOLD, TITLE TO IT IS TRANSFERRED, OR WHEN IT IS NO LONGER OCCUPIED BY THE
- 16. IF THE DECISION CONTAINED IN THIS FORM RESULTS IN DENIAL, REDUCTION, OR CANCELLATION OF RHS ASSISTANCE, THE BORROWER MAY APPEAL THE DECISION AND HAVE A HEARING OR MAY REQUEST A REVIEW IN LIEU OF A HEARING.

Form RHS 3550-12 (10-96)





Form Approved OMB No. 0575-0166

### United States Department of Agriculture **Rural Housing Service**

Account #:

### SUBSIDY REPAYMENT AGREEMENT

1. As required under Section 521 of the Housing Act of 1949 (42 U.5 502 of the Housing Act of 1949, is repayable to the Government upon the Housing Act of 1949, is repayable to the Government upon the Housing Act of 1949 (42 U.5 502 of the Housing Act	S.C. 1490a), subsidy received in accordance with Section the disposition or nonoccupancy of the security property.
For of the Housing Act OI 1949, is topay the secondary	L.
Deferred mortgage payments are meaned to be a second of the control of the	If I refinance or otherwise pay in full without transfer of

and included as subsky under this up-	a a standar of
Deferred mortgage payments are included as	of the single of
Deletion investigation in	is due. If I remaine of ourse was post
the form it is a second of the form of the form is a second of the form of the	a the sent payment of recapture can be deleriou,
Deferred mortgage payments are included as substry mater and up- 2. When I fail to occupy or transfer title to my home, recapture in the property, the amount of recapture	e will he calculated but, payment of the standard but will
2. Whom I amountly the amount of lecapture	The subordinated but will
2. When I fail to occupy or transfer title to my home, recapture is title and continue to occupy the property, the amount of recapture interest free, until the property is subsequently sold or vacated. If interest free, until the promissory note satisfied until the Government be released nor the promissory note satisfied until the Government be released nor the promissory note satisfied until the Government be released nor the promissory note satisfied until the Government be released nor the promissory note satisfied until the Government be released nor the promissory note satisfied until the Government be released nor the promissory note satisfied until the Government be released nor the promissory note satisfied until the Government be released nor the promissory note satisfied until the Government be released nor the promissory note satisfied until the Government be released nor the promissory note satisfied until the Government be released nor the promissory note satisfied until the Government be released nor the promissory note satisfied until the Government be released nor the promissory note satisfied until the Government be released nor the promissory note satisfied until the Government be released nor the promissory note satisfied until the Government be released nor the promissory note satisfied until the Government be released nor the promissory note satisfied until the Government because t	deferred, the Government management of recomments is
tint and boundaries is subsequently sold of vacated. In	the state of the s
interest free, until the property is subsequent	ent is naid in Itali. In annancia vi
mercer may note satisfied men the Government	Section 1
not be released not the promissory now	f settlement.
in the discounted 25% if paid in 1011 at time of	TOWARD Lang Cas and no les
not be released nor the promissory note sausticulum and option, recapture will be discounted 25% if paid in full at time of an option, recapture will be discounted 25% if paid in full at time of an option.	Service (RHS) loans \$85,900.00 less

not be receased hat the discounted 25% if paid in full at this of settlems	myray town the ann no less
an option, recapture will be discounted 25% if paid in full at time of settlements of the settlement o	Rural Housing Service (RHS) loans \$85,900.00 less
	Action -1 / / / / / / / / / / / / / / / / / /
3. Market value at time of initial subsidy \$ _85,000.55  equals my/our original equity \$ 900	0.00-
amount of any prior liens \$ equals my/our original equity by the market value.	
amount of any partiaged by dividing original equity by the market value.	•
amount of any prior liens \$equas my/out organized by dividing original equity by the market value.	complete the following formula.

If all loans are not subject to recapture, or if all loans subject to recapture are not being paid, complete the following formula. Divide the balance of loans subject to recapture that are being paid by the balance of all open loans. Multiply the result by 100 to determine the percent of the outstanding balance of open loans being paid.

determine the percen	TO THE COLUMN	•		Avers	ge interes	it rate pai	d		
5.	months loan	1%	1.1 2%	2.1 3%	3.1 4%	4.1 5%	5.1 6%	6.1 7%	>7%
	0 - 59 60 - 119 120 - 179 180 - 239 240 - 299 300 - 359 360 & up	.50 .50 .50 .50 .50 .50 .50	.50 .50 .50 .50 .50 .50 .45 .40	.50 .50 .50 .49 .46 .40	.50 .49 .48 .42 .38 .34	.44 .42 .40 .36 .33 .29	.32 .31 .30 .26 .24 .21	.22 .21 .20 .18 .17 .14	.11 .10 .09 .09 .09

Calculating Recapture б.

Market value (at the time of transfer or abandonment)

LESS:

Prior liens

RHS balance.

Reasonable closing costs,

Principal reduction at note rate,

Original equity (see paragraph 3), and

Capital improvements.

**EQUALS** 

Appreciation Value. (If this is a positive value, continue.)

Percentage in paragraph 4 (if applicable),

Percentage in paragraph 5, and

Return on borrower's original equity (100% - percentage in paragraph 3).

**EQUALS** 

Value appreciation subject to recapture. Recapture due equals the lesser of this

Value appreciation subject to received.	Date 16/10/6 2
Borrower Dahie's M. Kodeft	Date
PATRICIA M. RODGER Borrower	
F minutes ner 75	some, including the time for reviewing instructions, searching

Public reporting burden for this collection of information is estimated to average 5 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden, sources, gathering and maintaining the data needed, and completing and reviewing the collection of information, including suggestions for reducing this burden, to U.S. Department of Agriculture, Clearance burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to U.S. Department to this address. Forward to the Officer, STOP 7602, 1400 Independence Avenue, S.W., Washington, D.C. 20250-7602. Hease DO NOT RETURN this form to this address. Forward to the local USDA office only. You are not required to respond to this collection of information unless it displays a currently valid OMB control number. Officer, DIOT 1002, 1400 independence Avenue, D.N., mustangum, D.O. evelo-1002. Trease DO 1001 sectional must with with the stating with the s









### United States Department of **Agriculture**

**Pevelopment** Centralized Servicing Center P.O. Box 66827 St. Louis, MO 63166 (800) 793-8861 (Voice). (800) 438-1832 (TDD/TTY Hearing Impaired Only) or (314) 457-4450 (FAX)



### CERTIFIED MAIL RETURN RECEIPT REQUESTED

PATRICIA M RODGER 7206 EELPOT ROAD NAPLES

NY 14512

SUBJECT: NOTICE OF ACCELERATION OF YOUR MORTGAGE LOAN(S); DEMAND FOR PAYMENT OF THAT DEBT; NOTICE OF INTENT TO FORECLOSE; AND NOTICE OF YOUR OPPORTUNITY TO HAVE A HEARING CONCERNING THIS ACTION

PATRICIA M RODGER Dear

PLEASE TAKE NOTEthat the entire indebtedness due on the promissory note(s) and/or assumption agreement(s) which evidence the loan(s) received by you from the United States of America, acting through the United States Department of Agriculture Rural Housing Service (RHS), formerly Farmers Home Administration, is now declared immediately due and payable and demand is hereby made on you to pay this entire indebtedness. If payment in full is not made as demanded herein, the RHS intends to enforce its real estate mortgage(s) or deed(s) of trust given to secure the indebtedness by foreclosure of its lien(s) on your house.

Account Number(s)

Date of Instruments

<u>Amount</u>

10/10/02

85900.00

This acceleration of your indebtedness is made in accordance with the authority granted in the above-described instrument(s). The reason(s) for the acceleration of your indebtedness is (are) as follows:

MONETARY DEFAULT

unpaid principal and unpaid interest, as of 08/15/16, plus additional interest accruing at the rate The balance of the account is \$ 99665.31 per day thereafter, plus additional advances to be made by the United States \$ 2949.51 for the protection of its security, the interest accruing on any such advances, fees, or late charges, and the amount of subsidy to be recaptured in accordance with the Subsidy Repayment Agreement.

USDA is an equal opportunity provider and employer.

If you wish to file a Civil Rights program complaint of discrimination, complete the USDA Program Discrimination Complaint Form, found if you wasn to late a cave rogues program complaint of discretisting, conquere the CODA riogram placements companied to the form. You may online at http://www.ascr.usda.gov/complaint\_filing\_cust.html, or a any USDA office, or call (866) 632-9992 to request the form. You may onine at this arrangement and purposition and constraints of a sure constraint of the information requested in the form. Send your completed compl Department of Agriculture, Director, Office of Adjudication, 1400 Independence Avenue, S.W., Washington, D.C. 20250-9410, by fex (202) 690-7442 or emeil at program intake@usda.gov.



Unless full payment of this indebtedness is received within 30 days from the date of this letter, the United States will take action to foreclose its lien on your house and to pursue any other available remedies. Payment should be made by cashier's check, certified check, or postal money orders payable to the USDA/RD and mailed to the following address:

USDA-Rural Development P.O. Box 790170 St. Louis, MO 63179-0170

If you submit to the United States any payment insufficient to pay the account in full or insufficient to comply with any arrangements agreed to between the RHS and yourself, the payment WILL NOT CANCEL the effect of this notice. If insufficient payments are received and credited to your account, no waiver or prejudice of any rights which the United States may have will result and the RHS may proceed as though no such payments had been made.

YOUR RIGHT TO A DISCUSSION WITH RHS - You have the opportunity to discuss this decision to accelerate your loan(s) with a RHS official or have an administrative appeal hearing before the foreclosure takes place. This is an opportunity to discuss why you believe the United States is in error in accelerating your loan(s) and proceeding with foreclosure. If you desire to have an informal discussion with an RHS official or have any questions concerning this decision or the facts used in making this decision, you should contact this office in writing. The request for an informal discussion must be sent to the undersigned no later than 08/30/16. Requests which are postmarked by the must be sent to the undersigned no later than 08/30/16. Requests which are postmarked by the U.S. Postal Service on or before that date will be considered as timely received. You also have the right to an administrative appeal hearing with a hearing officer instead of, or in addition to, an informal discussion with this office. If you request an informal discussion with an RHS official, and this does not result in a decision in which you concur, you will be given a separate time frame in which to submit your request for an administrative appeal. See the attachment for your appeal rights.)

YOUR RIGHT TO AN ADMINISTRATIVE APPEAL HEARING - If you do not wish to have an informal discussion with an RHS official as outlined above, you may request an administrative appeal with a member of the National Appeals Division Area Supervisor, no later than 30 days after the date on which you received this notice. Requests which are postmarked by the U.S. Postal Service on or which you received this notice. Requests which are postmarked by the U.S. Postal Service on or before that date will be considered as timely received as requesting an administrative appeal. Please include a copy of this letter with your request.

If you fail to comply with the requirement outlined, the United States plans to proceed with foreclosure. You may avoid foreclosure by (1) refinancing your RHS loan(s) with a private or commercial lender or otherwise paying your indebtedness in full; (2) selling the property for its fair market value and applying otherwise paying your loan(s); (3) transferring the loan(s) and property to an eligible or ineligible the proceeds to your loan(s); (3) transferring the loan(s) and property to an eligible or ineligible applicant with RHS approval; or (4) conveying the property to the Government with RHS approval. Please contact our Centralized Servicing Center office at 1-800-793-8861, if you desire to satisfy your loan(s) by one of the above methods.





You cannot be discriminated against in a credit transaction because of your race, color, religion, national origin, sex, marital status, handicap, or age (if you have the legal capacity to enter into a contract). You cannot be denied a loan because all or a part of your income is from a public assistance program. If you believe you have been discriminated against for any of these reasons, you should write to the Secretary of Agriculture, Washington, D.C. 20250.

You cannot be discriminated against in a credit transaction because you in good faith exercised your rights under the Consumer Credit Protection Act. The Federal Agency responsible for seeing this law is obeyed is the Federal Trade Commission, Washington, D.C. 20580.

For questions regarding your account, please call Default Management toll free at 1-800-793-8861 or 1-800-438-1832 (TDD/TTY Hearing Impaired Only), 7:00 a.m. to 5:00 p.m., Monday through Friday, Central Time. Please refer to your Account number when you write or call us. Thank you.

> UNITED STATES OF AMERICA hom B. Herron

Thomas B Herron Director, Default Management Branch Rural Development United States Department of Agriculture

Date:

08/15/16

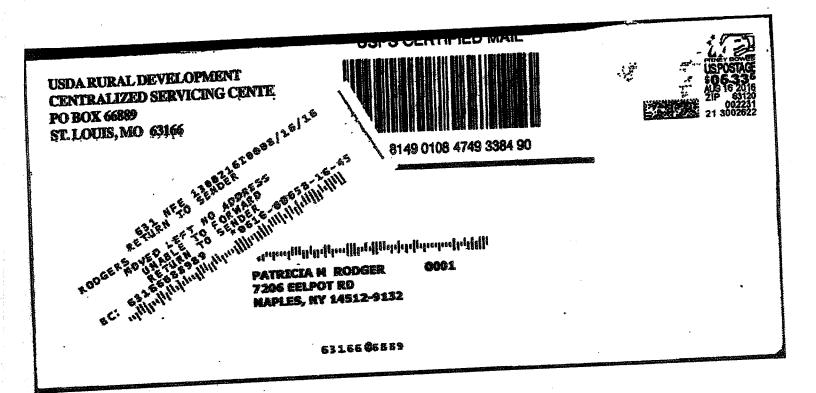
Attachment

State Office

This letter was mailed certified and regular mail on

08/15/16.







Date Produced: 08/22/2016

RETURNED

**USDA - RURAL HOUSING SERVICE:** 

The following is the delivery information for Certified Mail™/RRE item number 9414 8149 0108 4749 3384 90. Our records indicate that this item was delivered on 08/19/2016 at 05:07 a.m. in SAINT LOUIS, MO 63166. The scanned image of the recipient information is provided below.

Signature of Recipient:

EDOIE ALLY

Address of Recipient:

2 150A 1AZ 66889

Thank you for selecting the Postal Service for your mailing needs. If you require additional assistance, please contact your local post office or Postal Service representative.

Sincerely, United States Postal Service

The customer reference number shown below is not validated or endorsed by the United States Postal Service. It is solely for customer use.

Customer Reference Number: 30051992



**United States Department of Agriculture** 

March 14, 2017

Patricia M. Rodger 26 Lyons Street Naples, New York 14512

YOU MAY BE AT RISK OF FORECLOSURE. PLEASE READ THE FOLLOWING NOTICE CAREFULLY.

As of 03/14/2017, your home loan is 338 days and \$9,048.42 dollars in default. Under New York State Law, we are required to send you this notice to inform you that you are at risk of losing your home. Attached to this notice is a list of government approved housing counseling agencies in your area which provide free counseling. You can also call the NYS Office of the Attorney General's Homeowner Protection Program (HOPP) toll-free consumer hotline to be connected to free housing counseling services in your area at 1-855-HOME-456 (1-855-466-3456), or visit their website at http://www.aghomehelp.com/. A statewide listing by county is also available at http://www.dfs.ny.gov/consumer/mortg nys np counseling agencies.htm. Qualified free help is available; watch out for companies or people who charge a fee for these services.

Housing counselors from New York-based agencies listed on the website above are trained to help homeowners who are having problems making their mortgage

Rural Development • New York State Office Single Family Housing Division 441 South Salina Street, Sulte 357 • Syracuse, NY 13202 Voice (315) 477-8423 • Fax (855) 477-8531 • TDD 800-421-1220 (711)

USDA is an equal opportunity provider, employer, and lender.

If you wish to file a Civil Rights program complaint of discrimination, complete the USDA Program Discrimination Complaint Form (AD-3027), found online at http://www.ascr.usda.gov/complaint\_filing\_cust.html, or at any USDA office, or call (886) 632-9992 to request the form. You may also write a letter containing all of the Information requested in the form. Send your completed complaint form or letter to us by mail at U.S. Department of Agriculture, Director, Office of the Assistant Secretary for Civil Rights, 1400 Independence Avenue, S.W., Washington, D.C. 20250-9410, by fax (202) 690-7442 or email at program.intake@usda.gov.

payments and can help you find the best option for your situation. If you wish, you may also contact us directly at 315-477-6423 and ask to discuss possible options.

While we cannot assure that a mutually agreeable resolution is possible, we encourage you to take immediate steps to try to achieve a resolution. The longer you wait, the fewer options you may have.

If you have not taken any actions to resolve this matter within 90 days from the date this notice was mailed, we may commence legal action against you (or sooner if you cease to live in the dwelling as your primary residence.)

If you need further information, please call the New York State Department of Financial Services' toll-free helpline at (show number) or visit the Department's website at (show web address).

IMPORTANT: You have the right to remain in your home until you receive a court order telling you to leave the property. If a foreclosure action is filed against you in court, you still have the right to remain in the home until a court orders you to leave. You legally remain the owner of and are responsible for the property until the property is sold by you or by order of the court at the conclusion of any foreclosure proceedings. This notice is not an eviction notice, and a foreclosure action has not yet been commenced against you.

Sincerely,

CARLA REESE SFH Program Specialist



United States Department of Agriculture

### Certified Mail #70112970000342396266

March 14, 2017

Patricia M. Rodger 26 Lyons Street Naples, New York 14512

YOU MAY BE AT RISK OF FORECLOSURE. PLEASE READ THE FOLLOWING NOTICE CAREFULLY.

As of 03/14/2017, your home loan is 338 days and \$9,048.42 dollars in default. Under New York State Law, we are required to send you this notice to inform you that you are at risk of losing your home. Attached to this notice is a list of government approved housing counseling agencies in your area which provide free counseling. You can also call the NYS Office of the Attorney General's Homeowner Protection Program (HOPP) toll-free consumer hotline to be connected to free housing counseling services in your area at 1-855-HOME-456 (1-855-466-3456), or visit their website at http://www.aghomehelp.com/. A statewide listing by county is also available at http://www.dfs.ny.gov/consumer/mortg nys np counseling agencies.htm. Qualified free help is available; watch out for companies or people who charge a fee for these services.

Housing counselors from New York-based agencies listed on the website above are trained to help homeowners who are having problems making their mortgage

Rural Development • New York State Office Single Family Housing Division 441 South Salina Street, Suite 357 • Syracuse, NY 13202 Voice (315) 477-6423 • Fax (855) 477-8531 • TDD 800-421-1220 (711)

USDA is an equal opportunity provider, employer, and lender.

If you wish to file a Civil Rights program complaint of discrimination, complete the USDA Program Discrimination Complaint Form (AD-3027), found online at http://www.ascr.usda.gov/complaint\_filing\_cust.html, or at any USDA office, or call (888) 632-9992 to request the form. You may also write a letter containing all of the information requested in the form. Send your completed complaint form or letter to us by mail at U.S. Department of Agriculture, Director, Office of the Assistant Secretary for Civil Rights, 1400 Independence Avenue, S.W., Washington, D.C. 20250-9410, by fax (202) 690-7442 or email at program.intake@usda.gov.

payments and can help you find the best option for your situation. If you wish, you may also contact us directly at 315-477-6423 and ask to discuss possible options.

While we cannot assure that a mutually agreeable resolution is possible, we encourage you to take immediate steps to try to achieve a resolution. The longer you wait, the fewer options you may have.

If you have not taken any actions to resolve this matter within 90 days from the date this notice was mailed, we may commence legal action against you (or sooner if you cease to live in the dwelling as your primary residence.)

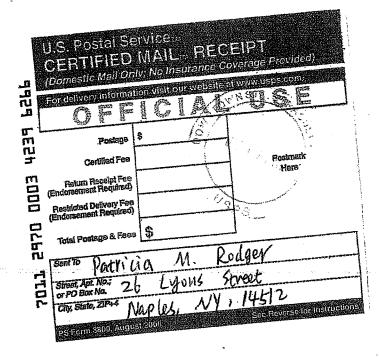
If you need further information, please call the New York State Department of Financial Services' toll-free helpline at (show number) or visit the Department's website at (show web address).

IMPORTANT: You have the right to remain in your home until you receive a court order telling you to leave the property. If a foreclosure action is filed against you in court, you still have the right to remain in the home until a court orders you to leave. You legally remain the owner of and are responsible for the property until the property is sold by you or by order of the court at the conclusion of any foreclosure proceedings. This notice is not an eviction notice, and a foreclosure action has not yet been commenced against you.

Sincerely,

CARLA REESE SFH Program Specialist

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the malipiece, or on the front if space permits.	A. Signature  X. J. L. J.
1. Article Addressed to: Patricia M. Rodger,	If YES, enter delivery address below:
26 Lyons Street 1 Naples, N1, 14512	3. Service Type  Certified Mail
2. Article Number 7011 2970 (Transfer from service label) 7011 2970	0003 4534 PSPP





#### **New York State Department of Financial Services** One State Street Plaza, New York, NY 10004

### **Proof of Filing Statement**

### To Whom It May Concern:

Section 1306 of the Real Property Actions and Proceedings Law (RPAPL) requires lenders, assignees or mortgage loan servicers servicing loans on 1-to-4 family residential properties in New York State to file certain information with the Superintendent of the Department Financial Services within three days after the mailing of a 90-Day Pre-Foreclosure Notice.

The information below pertains to a filing submitted to the Department of Financial Services as required in Section 1306 of RPAPL. The information is presented as filed by the lender, assignee or mortgage loan servicer.

Filer Information:

Name

: USDA Rural Development : 441 South Salina St., Suite 357

Address

Syracuse NY 13202

Filing Information:

**Tracking Number** 

: NYS4198795

Mailing Date Step 1

: 17-MAR-17 12.00.00.000 AM

Mailing Date Step 2

Judgment Date Step 3

Filing Date Step 1 Filing Date Step 1 Orig : 17-MAR-17 11.43.03.000 AM : 17-MAR-17 11.43.03.000 AM

Filing Date Step 2

Filing Date Step 3 Owner Occupd at Jdgmat

Property Type

Property Address

: 1 to 4 Family Home

: 7206 Belpot Road Naples

NY 14512

County

: Ontario

Date of Original Loan

: 10-OCT-02 12.00.00.000 AM

Amt of Original Loan

: 85900

Loan Number Step 1 Loan Number Step 2

Loan Reset Frequency

Loan Type

: 1st Lien

Loan Details

: Fixed Rate

Loan Term

: Other

Loan Modification

: No Modification

Days Delinquent

: Other

Borrower's Name

: Patricia M Rodger

Address

: 26 Lyons Street

Naples 14512

Borrower's Phone No

: 5853746992

Filing Status

: Step 1 Completed

Sincerely,

New York State Department of Financial Services

### Case 6:18-cv-06350 Document 1 Filed 05/08/18 Page 59 of 59

#### VERIFICATION

STATE OF NEW YORK	)	)	ss:
COUNTY OF MONROE	)		

Robert J. Kalb, being duly sworn, deposes and says:

- 1. I am an Attorney duly admitted to practice in the Federal Courts of the Western District of the State of New York and have read the foregoing Complaint.
- 2. The allegations of the Complaint are true, except those matters alleged-on information and belief, and those matters I believe to be true. The grounds of my knowledge and the sources of my information and belief are records of the Rural Housing Service, formerly known as the Farmers Home Administration and public records.
- 3. This verification is made by me and not by Plaintiff because the United States of America is a sovereign.

S/Robert J. Kalb

FORSYTH, HOWE, O'DWYER,

KALB & MURPHY, P.C.

One South Clinton Avenue, Suite 1000

Rochester, NY 14604

(585) 325-7515; Fax: (585) 325-6287

Email: Kalb@forsythhowe.com

Sworn to and subscribed before me

On this day: May 7, 2018

Mettie L. allyarder Notary Public

NETTIE L. ALEXANDER
Notary Public, State of New York
Qualified in Monroe County
Commission Expires January 3, 20